

**SAN JUAN DE DIOS EDUCATIONAL FOUNDATION, INC.  
INSTITUTIONAL REVIEW BOARD**

**PROTOCOL AMENDMENT SUBMISSION FORM (SJDEFIIRB FORM 3.4)**

**Section 1. To be filled up by the Principal Investigator**

IRB REFERENCE NUMBER		
PROTOCOL NUMBER		
PROTOCOL TITLE:		
PRINCIPAL INVESTIGATOR		
PROTOCOL APPROVAL DATE		
NATURE OF PROTOCOL AMENDMENT		
TYPE OF REVIEW REQUESTED	<input type="checkbox"/> EXPEDITED (Minor changes) <input type="checkbox"/> FULL REVIEW (More than minor changes or that amendment “materially affects risks to subjects”)	
Principal Investigator	Signature	Date

**Section 2. FOR IRB USE ONLY**

Comments		
PRIMARY REVIEWER	Signature	Date
<b>IRB FINAL ACTION</b>		
<input type="checkbox"/> Approval / Favorable opinion <input type="checkbox"/> Modifications required prior to approval <input type="checkbox"/> Disapproval / Negative opinion Reason/s for disapproval:		
MEMBER-SECRETARY	Signature	Date
CHAIR	Signature	Date