



# HREC Amendment request form

*For an amendment to ethically approved research, please fill out the information below.*

## Project Information

Mercy HREC reference number:

Project Title

Principal Investigator (PI):

Date of this form:

Project contact (if different to PI):

Project contact email:

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## Amendment Information

Type of Amendment category:  
*(Please select all that apply)*

Does this  
amendment raise  
any ethical issues?

Do the changes  
raise any  
privacy issues?

- Change/add investigator or personnel
- Protocol amendment
- PICF amendment
- Other supporting document amendment
- Investigator brochure amendment
- Additional site
- Extension of HREC approval
- Reactivate approval
- Other

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Plain language summary of proposed changes:

Justification of proposed changes:  
*Include all ethical and privacy considerations*

Amended documents included in this application:  
*Include document title, version number and date*

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## Declaration

The information in this amendment request form is complete and correct. The project is being conducted in keeping with the conditions of approval by the Mercy Health HREC (and subject to any changes subsequently approved) and in compliance with the *National Statement on Ethical Conduct of Human Research* (NHMRC, 2018).

PI Name:

Date

Please click to submit this form via email.

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## Research Office Use Only

Mercy HREC acknowledgement

Name

Position

Date

Comment