

Bates

Institutional Review Board IRB Extension Form

Original IRB#: _____

Original IRB approval date: _____

1st extension request

2nd extension request

Name of Researcher: _____

Faculty Supervisor (if appropriate): _____

Title of Research Project: _____

Number of participants enrolled to date. _____

Number of participants who withdrew? _____

Reasons if known:

Were there any unanticipated problems, or adverse events? YES NO

If yes is checked, please elaborate below.

Were there any changes in risks / benefits since last approval? YES NO

If yes is checked, please elaborate below.

Were there any amendments to the procedures since last review? YES NO

If yes is checked, please elaborate below.