|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **AMENDMENT FORM** | | | | |
| In the event that an approved research project requires amendment, this form must be submitted to the Departments of Defence and Veterans’ Affairs Human Research Ethics Committee (DDVA HREC) by the Principal Investigator (PI).  An amendment **must not** be implemented until approval has been granted by the committee.  All completed forms are to be electronically submitted to [ddva.hrec@defence.gov.au](mailto:ddva.hrec@defence.gov.au) | | | | |
|  | | | | |
| **SECTION 1: PROJECT DETAILS** | | | | |
| **Project Number:** |  | | | |
| **Project Title:** |  | | | |
| **Date of amendment submission:** |  | | | |
|  | | | | |
| **SECTION 2: PRINCIPAL INVESTIGATOR DETAILS** | | | | |
| **Name:** |  | | | |
| **Organisation (command/division):** |  | | | |
| **Phone:** |  | | | |
| **Email:** |  | | | |
|  | | | | |
| **SECTION 3: AMENDMENT DETAILS** | | | | |
| Proposed/ intended changes **-** select all that apply | | | | |
| research personnel [include name, contact details, conflict of interest declaration, role of project, brief CV not exceeding five pages]  eligibility criteria/ research cohort [updated recruitment and consent materials may need to be provided. Ensure that for research that involves active recruitment of Defence personnel, that Command Approvals are relevant to the cohort and current. Additional approvals may be required]  advertising/ recruitment [attach relevant documentation]  survey/interview questions/ focus group [attach revised survey, interview focus group questions]  site/s  data  extension to period of ethical approval  other (please specify) | | | | |
| Reason for the changes *(include a comment on the impact on the research project and the participants at sites)* | | | | |
|  | | | | |
| Do these changes raise any ethical issues? | | Yes | No | |
| If yes, identify the ethical issues. | | | | |
| List all amended documents to be reviewed. | | | | |
| **Document Title** - Insert additional rows if required. | | | | **Version & Date** |
|  | | | |  |
|  | | | |  |
|  | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SECTION 4: PARTICIPATING SITES** | | | | |
| Are all participating sites affected by this amendment?  If no, list all affected sites below. Insert additional rows if required. | | Yes | | No |
| **Site *(Organisation)*** | | | **State** | |
|  | | |  | |
|  | | |  | |
|  | | |  | |
| An amendment to an approved research protocol may also impact the individual research sites. The Commanding Officer (CO) at each affected site (named above) must be notified of the amendment by the PI to determine if the site is impacted. Final approval to implement an amendment at a site will be issued by that site’s CO. | | | | |
|  | | | | |
| **SECTION 5: PRINCIPAL INVESTIGATOR DECLARATION** | | | | |
| I confirm that this project is being conducted in keeping with the conditions of ethical approval. I confirm that the project is being conducted in compliance with the *National Statement on Ethical Conduct in Human Research*.  I confirm that I have not received any information in any form from anyone involved in the research to suggest this report does not accurately reflect the progress of the project. | | | | |
|  |  | | | |
| **Name** | **Signature** | | | |
| **Date:** | | | | |