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Description automatically generated**

**IBC Personnel & Award Modification Form**

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| **Principal Investigator & Protocol Information** |

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| **A. Principal Investigator (PI)** | | | |
| Name: |  | Department: |  |
| Email: |  | | |

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| --- | --- | --- | --- |
| **B. Protocol Information** | | | |
| IBC Protocol Title: |  | | |
| IBC Protocol Number: |  | Approval date: | Click or tap to enter a date. |
| Modification Type[[1]](#footnote-2):  (Check all that apply and complete relevant sections below.) | Add external award(s)  Change PI  Add or remove personnel | | |

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| **Modification(s)** |

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| --- | --- | --- | --- |
| **A. External Award(s)** | | | |
| List new external award information below. Only funded awards need to be included. | | | |
| **Sponsor** | **Award #** | **Start Date** | **End Date** |
|  |  | Click or tap to enter a date. | Click or tap to enter a date. |
|  |  | Click or tap to enter a date. | Click or tap to enter a date. |
|  |  | Click or tap to enter a date. | Click or tap to enter a date. |

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| **B. New Principal Investigator (PI)** | | | | |
| Provide information for the current and new PI below. A copy of the required CITI training completion certificate for the new PI must be submitted along with this modification form. For training requirements, see the [IBC website](https://www.uwlax.edu/grants/institutional-bio-safety-committee/). | | | | |
| Current PI Name: |  | | | |
| New PI Name: |  | | Department: |  |
| Email: |  | Employee Classification: | | Choose an item. |

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| **C. Personnel Changes** | | | |
| A PI should submit personnel changes whenever new faculty, staff, or students will begin work with materials described in an approved IBC protocol *or* when faculty or staff listed in an approved IBC protocol are removed from the project. Students enrolling in laboratory courses do not need to be added to a protocol. In the table below, identify all new personnel, including students, who will be working with the materials described in the protocol. Identify faculty or staff who are being removed from the protocol; students do not need to be formally removed. Add lines if needed. Copies of required CITI training completion certificates for all added personnel listed below must be submitted along with this modification form. For training requirements, see the [IBC website](https://www.uwlax.edu/grants/institutional-bio-safety-committee/). | | | |
| **Name** | **Add or Remove from Protocol** | **Personnel Type** | **Project Role**  **(e.g., PI, co-PI, research assistant)** |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |
|  | Add Remove | Choose an item. |  |

1. For all other types of modifications, a Biosafety Protocol Application form marked “revision” must be submitted. [↑](#footnote-ref-2)