

HS LOG NO. _____

APPENDIX D
RENEWAL FORM
SANTA CLARA UNIVERSITY
Human Subjects Committee

This form is to be used if an investigator wishes to renew a project within two years of the date from which the research was originally approved. The investigator should attach a copy of the original approved application and the report filed with the HSC at the end of the approval period. If the original approval was granted more than two years from the present date, the investigator must submit a new application. Unless otherwise stated, submit **three (3)** copies of this form.

DATE OF REQUEST: _____

PRINCIPAL INVESTIGATOR	DEPT./CENTER/UNIVERSITY	PHONE NUMBER: E-MAIL:
OTHER INVESTIGATORS (LIST ALL)	ADDRESS	PHONE NUMBER: E-MAIL:
FACULTY ADVISER NAME, DEPARTMENT, PHONE NUMBER, AND E-MAIL (IF STUDENT PROJECT):		
PROJECT TITLE:		
LEVEL OF REVIEW: EXEMPT () EXPEDITED () FULL REVIEW ()		
SIGNATURES: Principal Investigator Faculty Adviser (for Student Research) Date		
This renewal has been reviewed by the Santa Clara University HSC:		
FULL REVIEW () EXEMPT () EXPEDITED () CATEGORIES: _____		
APPROVED () DEFERRED () DISAPPROVED ()		
Project requires review more often than annual () Every _____ months		
Comments:		
SIGNATURE _____ Date _____		
[] Chair, HSC [] Member, HSC [] Area Representative		