**Francis Marion University
Institutional Review Board**

**Continuation of Research**

**Please fill out this form, scan, and email to therzog@fmarion.edu**

|  |  |
| --- | --- |
| Title of Study |  |
| Proposal Number: |  |
| Principal Investigator: |  |
| Date of Closure: |  |

Continuation of Study:

 I request a continuation of IRB approval. The project is still underway and there has been no change affecting the use of human participants.

I request a continuation of IRB approval. The project is still underway and the following changes have been made, affecting the use of human participants (attach additional sheets if needed).

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|  |  |
| Signature of Principal Investigator of Record | Date |