

INSTITUTIONAL BIOSAFETY COMMITTEE SAN JOSÉ STATE UNIVERSITY BUA AMENDMENT FORM

Principal Investigator:	BUA #:
Project Title:	

Use this form to submit any changes to your existing BUA-approved application.

Types of Major Changes

All major changes require a revised BUA application, including all BUA forms, to be submitted in addition to this form. Changes should be made directly to the BUA document using track changes. Amendments submitted without track changes will be returned to the PI as an incomplete submission.

- Change in the scope of research
- Change in Risk Assessment
- Adding/changing infectious agents
- Change in the containment level
- Change in sections of the NIH Guidelines
- Additional research procedures that result in an increase in risk
- Change in Principal Investigator (PI) on a research BUA

Requirements to Change the PI

- BUA Amendment Form
- Full curriculum vitae for the incoming PI (including publications and research experience)
- Sponsor authorization of the change in PI (letter or email acceptable)
- Any change that doesn't fall into one of the categories listed as a minor change

Reason for Major Change(s):

Minor Changes

Minor changes do not require a revised BUA Application Form, but minor changes must be incorporated into the BUA application at a subsequent major change or triennial review (whichever occurs first)

- Update in general information (office location, phone number, laboratory contact)
- Change to title. New title:
- Other compliance committee approvals (e.g., IACUC):
- Addition or removal of research personnel
- Adding or removing lab room numbers with BSO approval
- Other changes that do not affect the biosafety level or NIH classification

Change to Research Location(s)

List any modifications to SJSU locations where work will be conducted in the table below.				
Building(s)	Laboratory	Room Number(s)	Modification	
If there is change to external collaborators (domestic or foreign), identify the institution and the work to be conducted:				
Change in Research Personnel				
List all <u>personnel currently</u> working on this protocol other than the PI. Include internal collaborators, technicians, post docs, graduate students, work study students, volunteers, etc. Attach a separate page if necessary.				
Name		Responsibility		
Change in Laboratory Contacts (other than PI)				
Name	Email	Phone Number	Title	
Acknowledgement o	of Responsibilities			
☐ You are aware, as the Principle individuals to whom you delease personnel involved in the properties and emergency procedures, and one of the research will be concepted procedures.	ncipal Investigator, you are usegate research responsibilities oposed project in matters of and that such training remains ducted in accordance with appropriate the such training remains and trainin	elete, and accurate to the best of altimately responsible for the conses. You are responsible for ensuring potential biohazards, relevant bious current. Explicable laws, regulations, and Surce, or research-related accidents	duct of this research and the ng the training of all osafety practices, techniques, ISU University policies and	

☐ Research records will be kept for at least 3 years after completion of the research (a longer period may be required by a sponsor or funding agency). All records must be accessible for inspection and copying by authorized representatives.
Signature:
Name:
Date: