



FOR COMMITTEE USE ONLY IBC# _____
 Approved _____
 Not Approved _____
 IBC Chair/BSO _____
 Date Review Completed _____

Florida Atlantic University
 Institutional Biosafety Committee
 Addendum/Modification Registration Form

Complete this application if there are changes to your research project involving rDNA, infectious agents, human material and biological toxins. If the proposed addendum/modification changes the overall scope or intent of the project, it is considered a major change and a new IBC registration form must be completed. For questions, please contact the BSO at 297-0028.

Principal Investigator _____ Phone _____

Department _____ Fax _____

IBC# _____ E-mail _____

Project Title _____

Project Type: Biological Agent Human Cell Lines/Blood rDNA Other _____

Type of Change/Modification:

<input type="checkbox"/> Project Personnel <input type="checkbox"/> Project Location <input type="checkbox"/> Biological Agent/rDNA <input type="checkbox"/> Change in Procedures	<input type="checkbox"/> Laboratory Equipment <input type="checkbox"/> Change in Title <input type="checkbox"/> Change in Funding Agency <input type="checkbox"/> Other _____
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Description of Modification:

Reason for Modification:

List Personnel Changes:

Name	Job Title	Status
		<input type="checkbox"/> Add <input type="checkbox"/> Delete
		<input type="checkbox"/> Add <input type="checkbox"/> Delete
		<input type="checkbox"/> Add <input type="checkbox"/> Delete

As Principal Investigator, I hereby certify that all laboratory staff will be given the protocols that describe potential biohazards and precautions to be taken while working on this project and will attend compliance safety training and follow FAU policies.

Principal Investigator's Signature _____ Date _____

Send electronic copy of this form to dward@fau.edu and submit the signed form and a copy of the SOP to the Biosafety Officer located at FAU/EH&S 112 CO, Boca Raton, FL 33431 or fax (561) 297-2210. Please also save a copy for your records.