



**ANGELES UNIVERSITY FOUNDATION
INSTITUTIONAL ETHICS REVIEW COMMITTEE**

AMENDMENT REVIEW

GENERAL INSTRUCTIONS: Please accomplish seven copies of this form and amendments to be submitted to the AUF-IERC.	
1. Reference number: _____	
2. Principal Investigator: _____ Signature over printed name	
3. Address/Contact numbers: _____	
4. Sponsor: Name: _____ Protocol No.: _____	
5. Project title: _____	
6. Date of Initial Approval: _____	
7. Date of Submission: _____	
8. Received By: _____	
List of Amendment	Reason
1.	
2.	
3.	
4.	

To be filled out by AUF-IERC

Recommendation <input type="checkbox"/> Approval <input type="checkbox"/> Withholding Approval <input type="checkbox"/> Disapproval
Remarks: _____ _____
MEMBER: <SIGNATURE OVER PRINTED NAME> DATE: <dd/mm/yyyy>
AUF- IERC CHAIR: <SIGNATURE OVER PRINTED NAME> DATE: <dd/mm/yyyy>