

## Medical Student Research Scholarship Change in Project Form

Occasionally in research, timelines and methods need to be adjusted for a variety of reasons. The Medical Student Research Office understands how fluid research can be and wants to be made aware of changes from your original application's protocol.

If you or your mentor realize you will need: an extension from your original end date, to change your methods, specific aims, duties, or hypotheses on your project, please complete and submit the following form to [research.education@osumc.edu](mailto:research.education@osumc.edu) as soon as possible. Projects are permitted to continue into the next academic year. We understand that your time in the lab will be limited significantly due to your increased course load. This request should be submitted either by or in conjunction with your mentor so he or she has approved the proposed changes.

Should you or your mentor have any questions, please do not hesitate to contact the office at 614.685.9106, 1190A Graves Hall or [research.education@osumc.edu](mailto:research.education@osumc.edu).

Student Name:

Student E-Mail Address:

Mentor Name:

Mentor E-Mail Address:

Nature of Request (indicate all that apply and elaborate below)

Extension of project end date

Original end date:

New End Date:

Change in specific aims

Change in student duties/responsibilities

Change in methods

Change in hypotheses

Request to return funds

Please illustrate (a few paragraphs) what has prompted this request, the efforts made to alleviate its impact on your project, and justification for the proposed changes. If you are requesting an extension that will go into the next academic year, please indicate a new or amended timetable of your research duties.