



Project Modification Request (Institutional Fund)

To the Dean of Scientific Research

With Reference to the approval of financing research project number () entitled () funded by Ministry of Education (Institutional Fund Program), and after reviewing the unified regulations of scientific research in Saudi universities, and the implementation rules and regulations of Imam Abdulrahman bin Faisal University (IAU), we would like to request you approval for the following modifications:

| <input type="checkbox"/> Change the project plan | <input type="checkbox"/> Add a consultant | |
|---|--|-------|
| <input type="checkbox"/> Transfer authority of PI to an alternative PI ^(*) ^(**) | <input type="checkbox"/> Replace a consultant | |
| <input type="checkbox"/> Replace a Co-Investigator ^(*) | <input type="checkbox"/> Extend the duration of the project from (/ /20) to (/ /20) | |
| <input type="checkbox"/> Add a Co-Investigator ^(*) | <input type="checkbox"/> Increase the budget fund from (SR) to (SR)⁽¹⁾ | |
| <input type="checkbox"/> Replace a Research Assistant | <input type="checkbox"/> Transfer between 'line items' in the budget. | |
| <input type="checkbox"/> Add a Research Assistant | <input type="checkbox"/> Terminate the research project | |
| <input type="checkbox"/> Other (Specify) | | |
| Details of the Request (Explain in detail the reason for the requested change. Explain the effects of the change on the objectives, outcome, and management plan of the project): | | |
| Justification (When applicable, clarify with necessary documents and evidence the need for the requested change): | | |
| Commitment (State clearly the negative impact of the requested change on the outcomes of the project and the mitigation plan to ensure that the proposed originality of the project will be maintained): | | |
| Name of PI/ | Signature: | Date: |
| Name of the withdrawn Co-PI/ Consultant | Signature: | Date: |





| | | |
|---|------------|-------|
| A statement of approval from the withdrawn PI/ Co-Pi/ Consultant to withdraw from the project | | |
| Is there any intellectual property of the withdrawn PI/Co-PI/Consultant that need to be acknowledged in the published work later | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| If yes, please explain: | | |
| A statement about the withdrawn PI/ Co-PI / Consultant's contribution (if any) to the project | | |
| Name of the replacement PI/ Co-PI | Signature: | Date: |
| Vice Dean of the Deanship of Scientific Research: Dr. Afnan Aljaffary | | |
| <input type="checkbox"/> Accept <input type="checkbox"/> Not accept <input type="checkbox"/> Signature: | | |
| Dean of the Deanship of Scientific Research: Dr. Reem Yussuf Al Jindan | | |
| <input type="checkbox"/> Accept <input type="checkbox"/> Not accept <input type="checkbox"/> Signature: | | |
| Vice President for Scientific Research and Innovation: Prof. Fahd Al-Harbi (Chairman of the Institutional Fund Committee) | | |
| <input type="checkbox"/> Accept <input type="checkbox"/> Not accept <input type="checkbox"/> Signature: | | |

(1) Attach the purchase orders, quotations and paid bills for the purchased items.

** The replacement PI should sign this form to indicate his/her commitment to take on all the responsibilities of the former PI.

*To replace or add a research team, attach the researcher's CV alongside the request.

To get the form in word format
You can scan the following barcode

