

# Master of Science in Clinical Investigation and Translational Science

## STUDENT AMENDED RESEARCH PACKET CHECKLIST

### Required Documentation:

Documentation below should be emailed as separate PDF documents to the MSCI-TS Academic Coordinator by the student.

### Request to Amend MSCI-TS Student Research Project form

#### Instructions:

Complete the form and obtain signatures of proposed Supervising Professor and/or Supervising Committee members or current members dependent upon the change(s) made.

Submit form with required documents listed below in accordance with what change(s) are being made.

#### Amending Supervising Professor

- ☐ Supervising Professor's NIH Biosketch
- ☐ Supervising Professor's Letter of Support

Letter includes:

- Brief overview of the planned research project including the student's role/involvement in the research project.
- Statement of commitment to the student's education and training throughout the student's time in the MSCI-TS Program.
- If the student is international (F-1 or J-1 visa), an agreement to provide a bi-annual statement regarding continued support for enrollment in the MSCI-TS Program.
- Supervising Professor's Signature

#### Amending Research Supervising Committee (RSC)

- No other documents required unless the proposed change is not a member of the MSCI-TS Graduate Faculty. (Documents required will be obtained from the proposed member.)

#### Amending Research Plan/Title:

- ☐ Supervising Professor's Letter of Support
  - See requirements above, under Amending Supervising Professor

- ☐ Amended Research Plan

- Double-spaced, typewritten plan (*6-page limit*) includes:
  - Hypothesis
  - Specific Aims
  - Significance (*with background, references, and rationale for the proposed studies*)
  - Experimental Design (*including the number of planned subjects/observations and statistical analyses*)
  - References (*not included in the 6-page limit*)

- ☐ Research Title

- A request to change an approved research plan must be accompanied by the revised research plan and a cover memorandum that describes the basis for the request.

# Request to Amend MSCI-TS Student Research Project

(Signature Approval of Supervising Committee Required)

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Request to Change:

☐ **Supervising Professor**  
(*Current*) Supervising Professor: \_\_\_\_\_  
  
(*Proposed*) Supervising Professor: \_\_\_\_\_  
UTHSA E-mail: \_\_\_\_\_

☐ **Research Supervising Committee (RSC)**  
(*Current*) Supervising Committee:  
MSCI-TS COGS Member: \_\_\_\_\_  
  
MSCI-TS Graduate Faculty Member: \_\_\_\_\_  
  
External Expertise Specific Faculty Member: \_\_\_\_\_  
  
(*Proposed*) Supervising Committee:  
MSCI-TS COGS Member: \_\_\_\_\_  
UTHSA E-mail: \_\_\_\_\_  
  
MSCI-TS Graduate Faculty Member: \_\_\_\_\_  
UTHSAE-mail: \_\_\_\_\_  
  
External Expertise Specific Faculty Member: \_\_\_\_\_  
UTHSA or Outside E-mail: \_\_\_\_\_

☐ **Research Plan/Title:** \_\_\_\_\_

The digital signatures below signify review and approval of the requested changes.

_____ Student Name & Credentials	_____ Signature	_____ Date
_____ Supervising Professor Name & Credentials	_____ Signature	_____ Date
_____ MSCI-TS COGS RSC Member & Credentials	_____ Signature	_____ Date
_____ Graduate Faculty RSC Member & Credentials	_____ Signature	_____ Date
_____ Expertise Specific Faculty RSC Member & Credentials	_____ Signature	_____ Date