

IR-4 Amendment Form

SOP amendment from Headquarters SOP 7.4:03 Appendix A

Effective date: October 3rd, 2016

Description of SOP Amendment:

This SOP amendment changes Appendix A the Authorization Form; Checkout and Return of Study Files/Data of SOP 7.4:03.

Reason for SOP Amendment:

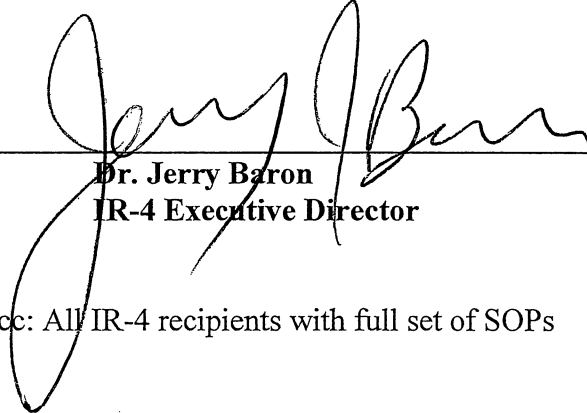
Appendix A the Authorization Form-Checkout and Return of Study Files/Data of SOP 7.4:03 has been updated to provide a more efficient process to request and return data from the archives. This form also gives the ability for other programs within IR-4 to request data from IR-4 Headquarters Archives.

Note that this appendix will become effective prior to SOP 7.4:03 revisions, reviews and management approval which are currently in progress.

Impact on Operation:

Allows for the use of one form for any program area to request data from archives.

Authorization:



Dr. Jerry Baron
IR-4 Executive Director

26 Sept 2016

Date

cc: All IR-4 recipients with full set of SOPs

JB/ks

Authorization Form
Checkout and Return of Study Files/Data

Study Number: _____

Program: Food Use _____ QA _____ Biopesticide* _____ Other* _____

Location: _____ _____ _____ _____

Archivist Initials & Date _____

Date Due (7 days from date of removal): _____

Description of Materials Removed:

The individual designated below may sign the above material out of the Archives:

| | | |
|-----------------------|-----------|------|
| Designee Name (print) | Signature | Date |
|-----------------------|-----------|------|

If the Designee needs to have the above out longer than 7 days, Management must authorize approval:

| | | |
|-------------------------|-----------|------|
| Management Name (print) | Signature | Date |
|-------------------------|-----------|------|

I certify that I (designee above) did/did not (circle one) remove or add data or make any changes to the contents of this material returned to the archives**:

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

If items removed, changed and/or added example below:

Date Returned/Archivist Initials: _____

*SOP currently being revised, scope will be expanded to include other programs.

Removal, alteration or addition of data to archived files will require written authorization from management, and will be coordinated with the Archivist.