**SELCUK UNIVERSITY FACULTY OF PHARMACY**

**TO THE SCIENTIFIC RESEARCH ETHICS COMMITTEE**

**̶** **TITLE CHANGE PETITION ̶**

**.../.../202.**

I would like to change the title from **"……………………………………."** to **"…………………………………………"** in the project study carried out in the Department of **……………………..**, Faculty of Pharmacy and approved by your Ethics Committee with the decision no. **../..** dated **../../202.**.

I am kindly request your consent for the necessary action.

 ***Signature***

 **Name, Surname**

 Project Coordinator