Centre for Evaluation and Methods (CEM) Collaboration Request Form

To be completed by the Chief Investigator/Enquirer:

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| --- | --- |
| **Trial/Project Name** |  |
| **Study Acronym (If known)** |  |
| **Chief Investigator** |  |
| **Primary contact details** |  |
| **Proposed co-applicants** |  |
| **Funder** |  |
| **Funding scheme** |  |
| **Sponsor (if known)** |  |
| **Is this a RDS referral? If ‘Yes’, state the location** | [ ]  Yes [ ]  No Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Which CEM unit are you requesting to work with?** | [ ]  Pragmatic Clinical Trials Unit[ ]  Barts Clinical Trials Unit - Cancer[ ]  Barts Clinical Trials Unit - Cardiovascular CTU[ ]  Barts Clinical Trials Unit - Experimental Medicine & Rheumatology[ ]  Barts Clinical Trials Unit - Other[ ]  Health Economics and Policy Research Unit[ ]  Methodology Research Unit[ ]  Not Known |
| **Stage of application: (e.g. expression of interest/full proposal)** |  |
| **Submission deadline (include all stage deadlines if multi-stage)** |  |
| **Proposed start date and duration** |  |
| **Is this a feasibility study or pilot trial?** |  |
| **What is the research question(s)?** |  |
| **Brief summary of the clinical problem, what is already known and how this study will address the research question (up to 500 words)** |  |
| **PICO (i.e. brief statement of Population, Intervention, Comparator, Outcome)**  |  |
| **What kind of collaboration does your project require from the Clinical Trials Unit?** | [ ]  Study design[ ]  Statistics[ ]  Trial management[ ]  Data management[ ]  Health economics[ ]  Methods research[ ]  Other (please specify): |
| **How did you hear about us?** |  |

Please send completed forms to: **cem-enquiries@qmul.ac.uk**