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| **Title (Long/acronym )**  Please complete the following and include any further details as needed to support your request for the Oxford Brain Health Clinical Trial Unit’s support. | **image002.jpg@01D5430A** |
| **Sponsor (if known)** |  |
| **Chief Investigator** |  |
| **Principle Investigator** |  |
| **Substantive contract status** |  |
| **Honorary affiliations** |  |
| **Introduction** |  |
| **Research question** |  |
| **Primary objectives** |  |
| **Secondary objectives** |  |
| **Exploratory objectives** |  |
| **Study design** |  |
| **Sample size** |  |
| **References** |  |
| **Funding status** |  |
| **Study period (including any milestones)** |  |
| **Existing arrangements (i.e. QA, Staff, Site selection, contracts, IP etc.)** |  |
| **Expectation from CTU** |  |
| **QA arrangement proposed by the investigator** |  |