**Support request instructions:**

If your study is in the area of mental health or neurosciences, please make an appointment initially to speak to an NIHR RSS advisor at [www.ctu.co.uk/NIHR-RSS](http://www.ctu.co.uk/NIHR-RSS)

For all other clinical areas please complete the below. Once completed, return to *ctu@kcl.ac.uk* and attach a PICOT Summary or summary of your study proposal

(Please see *http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3430448/*)

**Q1. Main point of Contact:**

Name:

**Q2. Contact details**

Telephone: Email Address:

**Q3. Does the study require MHRA approval?**

*Please visit the following links:*

[*https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/317952/Algothrim.pdf*](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/317952/Algothrim.pdf)

[*https://www.gov.uk/guidance/notify-mhra-about-a-clinical-investigation-for-a-medical-device*](https://eur03.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.gov.uk%2Fguidance%2Fnotify-mhra-about-a-clinical-investigation-for-a-medical-device&data=05%7C02%7Caleksandra.kata%40kcl.ac.uk%7Ce1d2e37a076f4a6f462308dd5028ff01%7C8370cf1416f34c16b83c724071654356%7C0%7C0%7C638754859185147866%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=H8e0ssgUORVhF5K8oiB5Mx3aunM6dBi5s5gSV30%2FvsQ%3D&reserved=0)

[ ]  Yes, CTIMP [ ]  Yes, non-CE-marked Medical Device [ ]  No

**Q4.** **Is the study a feasibility or pilot trial?**

[ ]  Yes [ ]  No

**Q5. Is the planned project funded? *(tick only one)***

[ ]  No, not decided on funder

[ ]  No, one-stage application process - *go to question 6*

[ ]  No, at outline application stage (stage one) *- go to question 6*

[ ]  No, at full application stage (stage two) - *go to question 6*

[ ]  Yes, funded, in setup stage - *please provide award letter - go to question 7*

[ ]  Yes, patient recruitment started - *please seek alternative support*

**Q6. Submission deadline:**

Submission Date: *\_ \_ / \_ \_ / \_ \_ \_ \_*

**Q7. What is the grant duration?**

Start Date: *\_ \_ / \_ \_ / \_ \_ \_ \_* End Date: *\_ \_ / \_ \_ / \_ \_ \_ \_*

**Q8. Planned start date of patient recruitment?**

Planned start date of patient recruitment:  *\_ \_ / \_ \_ / \_ \_ \_ \_*

**Q9. Funder**

**NIHR GRANTS:** [ ]  HTA [ ]  EME [ ]  PHR [ ]  PGfAR [ ]  HS&DR [ ]  RfPB [ ]  Doctoral Fellowship [ ]  Post-doctoral fellowship

**MRC GRANTS:** [ ]  MRC DPFS [ ]  MRC Other

**OTHER GRANTS:** [ ]  Industry [ ]  Wellcome Trust [ ]  European Union [ ]  Charity

[ ]  Other, p*lease specify: \_\_\_\_\_\_\_\_\_\_\_\_*

**Q10. Funding call URL**

URL:

**Q11. Services being requested from the KCTU:**

[ ]  Web based randomisation service [ ]  Operational Support [ ]  Trial statistician [ ]  Qualitative Social Scientist

[ ]  Web based trial database/EDC system [ ]  Health Economist [ ]  Pharmacy IMP management support

[ ]  Laboratory services for SIMS investigators *(note: this service is only available to (co-)applicants based in the School of Immunology & Microbial Sciences)*

**Q12. Full trial title**

Trial title:

**Q13. Trial acronym**

Trial acronym:

**Q14. Will patient recruitment be: *(tick only one)***

[ ] UK Single Site [ ] UK Multicentre [ ] Multinational *(European sites only)* [ ] Multinational *(with non-European Sites)*

**Q15. Details of trial Chief Investigator / lead applicant (provide both if different)**

**Chief Investigator (CI)**

Name:

Telephone: Email Address:

**Lead Applicant (if different to CI)**

Name:

Telephone: Email Address:

**Q16. Substantive employer of the Chief Investigator *(tick only one)***

[ ]  KCL – *go to question 16a*

[ ]  SLaM – *go to question 16b*

[ ]  KCH – *go to question 16b*

[ ]  GSTT – *go to question 16b*

[ ]  Other*, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ & go to question 17*

**Q16a. If KCL, please specify school *(tick only one)***

[ ]  Dental Institute [ ]  FoLSM [ ]  IoPPN [ ]  NMPC [ ]  Other, p*lease specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Q16b. If KCH, GSTT or SLaM, does the CI have an adjunct position at KCL?**

[ ]  Yes – *please provide authorised appointment letter* [ ]  No

*(*[*https://internal.kcl.ac.uk/hr/recruitment/adjunct-academic-appointments*](https://internal.kcl.ac.uk/hr/recruitment/adjunct-academic-appointments)*)*

**Q17. Lead NHS R&D Office *(tick only one)***

[ ]  GSTT [ ]  KCH [ ]  SLaM [ ]  Other, p*lease specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Q18. Sponsor (tick all if co-sponsored)**

[ ]  GSTT [ ]  KCH [ ]  KCL [ ]  SLaM [ ]  Other, p*lease specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Q19. Study type (please tick all that apply)**

[ ]  Paediatric [ ]  Mental Health [ ]  Nurse Led [ ]  Palliative Care [ ]  Cancer [ ]  Women’s Health [ ]  Dental

**Q20. Is this trial targeting any of the areas below (please tick any that apply)?**

[ ]  Antimicrobial resistance [ ]  Drugs, diagnostics and medical equipment for elderly patients

[ ]  Lifestyle diseases, diabetes and obesity [ ]  Mental health, dementia

[ ]  Personalised and stratified medicine [ ]  Minimising medical errors

[ ]  Vaccines and drugs for infectious diseases

**Q21. Please provide names of any KCL employees who have already agreed to be co-applicants on the grant (including clinicians, statisticians, bioinformaticians, health economists, qualitative researchers, operational staff):**

***Note: this is to avoid us approaching KCTU affiliated academics, if others have already agreed informally to support the project and to allow us to co-ordinate with the appropriate groups for KCL salary costings***

**Q22. Do you wish the project to be considered by any of the specialist sections of KCTU?**

**KCTU Specialist Sections**

[ ]  Oral Clinical Research@KCTU [ ]  Women’s & Children’s@KCTU