New Business Proposal Form

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| **1. Name of Chief Investigator (CI):**       |
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| **2. Department:**       |
|  |
| **3. Organisation:**       |
|  |
| **4. Work telephone number of CI:**       |
|  |
| **5. Work email address of CI:**       |
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| **6. Have you spoken to any staff at** BCTU No **[ ]**  Yes**[ ]** CRCTU No**[ ]**  Yes**[ ]** **If yes, please provide their name(s):**       |
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| **7. Working title and/or acronym:**      |
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| **8. Disease area (max. 100 characters):**       |
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| **9. Concept/research question to be addressed (max. 150 words):**       |
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| **10. Brief background/justification (max. 300 words):**       |
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| **11. Planned intervention or treatment arms**:       |
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| **12. Has any patient and public involvement and engagement (PPIE) been undertaken to support this proposal?**  No **[ ]**  Yes **[ ]**  |
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| **13. Do you anticipate the data from this trial will be included in a package for regulatory filing?**  No **[ ]**  Yes **[ ]**  |
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| **14. Are you working to a specific deadline:**  No**[ ]**  Yes**[ ]** **If yes, please state: Date:**       **Name of funder:**      **Commissioned call ref (if applicable):**       |
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| **15. Is this a Fellowship application:**  No**[ ]**  Yes**[ ]**  |
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| **16. Will this proposal include clinical sites outside of the UK?** No**[ ]**  Yes**[ ]** If yes, please state countries/continents:       |
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| **17. Has the proposal been discussed by a national or regional independent group?**No [ ]  Yes [ ] If yes, please tick the appropriate group and attach proof of approval where applicable:Birmingham NIHR BRC [ ]  MW-ATTC [ ] Cancer NIHR Clinical Study Group (CSG) [ ]  TAP [ ] IMPACT [ ]  Other:       |

**18. Please attach any other appropriate supporting documentation.**

**Please email completed form to appropriate CTU using the email addresses below:**

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| For BCTU: bctu@contacts.bham.ac.uk  | For CRCTU: newbusiness@trials.bham.ac.uk  |