

Form #2: Clinical Research Division Planning Form
Externally Sponsored/Multicenter Study

Please submit to Jennifer Victory, RN, CCRC
Clinical Research Nurse Supervisor
Jennifer.victory@bassett.org

- Title of Project: _____
- Principal Investigator: _____
 - Department: _____
 - Best Contact Method/#: _____
- Co/Subinvestigators: _____
- Sponsor: _____
- Sponsor Contact: _____
- Brief Description of Study:

- Approximate number of expected participants (if known): _____
- Funding Source and amount
- If available please attach copy of sponsor protocol, contract/clinical trial agreement, sponsor informed consent template.
- Expected time frame for recruitment and study completion