



## Application for Conducting Clinical Trial /Research Involving Patients in NTEC

### Part I: To be completed by applicant

- A. Project Title or Short Title (if any): \_\_\_\_\_  
\_\_\_\_\_
- B. Study Protocol No.: \_\_\_\_\_ C. CREC Ref No.: \_\_\_\_\_
- D. Name of Principal Investigator (PI): \_\_\_\_\_
- E. Staff Status: HA/CUHK F. Department/Hospital: \_\_\_\_\_
- G. Anticipated Start Date: \_\_\_\_\_ (Clinical Trial can only be started upon approval given.)
- H. Planned End Date: \_\_\_\_\_
- I. Documents Required (Please tick and attach):
- Clinical Research Ethics Committee Approval (Mandatory)
- Clinical Trial Certificate
- copies Indemnity Form for Sponsored Trials (*can be submitted separately for process*)
- Memo from CRMO confirming the coverage of clinical trial insurance, or Clinical Trial Insurance Certificate (*for investigator-sponsored trials only*)
- Undertaking with Clinical Research Pharmacy (CRP) (*for PWH only -- when applicable*)
- J. Working Hours Involved in Conducting the Clinical Trial/ Research: (*attach additional sheet if required*)

Name of HA staff involved (HAHO HR Circular 4/2003 refers) <i>Not applicable for University staff</i>	Rank	Expected number of hours spent per week in conducting the research/ trial	
		<u>During</u> working hours	<u>Outside</u> working hours

### Submitted by:

Signature of PI: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Nos: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Part II: To be completed by COS/Director/Head of Department

I support the research / clinical trial commitment listed above for HCE approval and consider that service delivery of my department will not be unduly affected.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

COS in \_\_\_\_\_, \_\_\_\_\_ Hospital Date: \_\_\_\_\_

### Part III: To be completed by HCE /Delegate

Application is approved / not approved Remarks: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Principal Investigators should complete this form together with the required documents(s) and send to General Office of their respective hospitals for processing (except for PWH: please send to Clinical Research Management Office (CRMO), 8/F Lui Che Woo Clinical Sciences Building, PWH for processing).*