

<b>Application Date:</b>
<b>Title of Proposed Project:</b>

<b>Qualified Investigator Name:</b> <i>(first, middle, last name)</i>	
<b>Investigator's Title:</b>	
<b>Primary Mailing Address:</b>	
<b>Telephone:</b>	
<b>Fax Number:</b>	
<b>E-Mail:</b>	

<b>Contact Person Name:</b> <i>(e.g. administrative assistant )</i>	
<b>Telephone:</b>	
<b>E-Mail:</b>	

<b>Summary of research proposal</b> <i>(Please attach a separate 3-4 page document describing details of the following):</i>	
<ul style="list-style-type: none"> <li>• Introduction</li> <li>• Hypothesis</li> <li>• Study Objectives</li> <li>• Background &amp; Preliminary Data</li> </ul>	<ul style="list-style-type: none"> <li>• Methods</li> <li>• Statistical Design</li> <li>• Significance of Research</li> <li>• Rationale for Access to clinical trial(s) materials</li> </ul>

<b>Type and Amount of Material Requested:</b>	
CCTG Trial:	
Paraffin embedded material: <input type="checkbox"/>	
Unstained sections: <input type="checkbox"/>	Number of cases: Number per case:
Serum <input type="checkbox"/>	Number of cases:
Fresh/frozen material (if available):	DNA <input type="checkbox"/> RNA <input type="checkbox"/>

TMA's (specify)

**Has this project/will this project be peer-reviewed and approved by a granting agency?**

Yes  No

If YES, indicate which agency\*:

If NO, indicate why not:

**Has this proposal been submitted to your REB/IRB and approved?**

Yes  No

If YES, Please enclose a copy of the approval letters from the granting agency and REB/IRB:

If NO, indicate why not:

**Is funding available to carry out this project?**

Yes  No

If YES, indicate source:

If NO, how will funding be attained?

Please attach a **current curriculum vitae** for the qualified investigator named in this application.

<b>Supporting documentation:</b> Please make sure that you have enclosed the following documents	<i>Document send by:</i>
1. A brief description of the research proposal	email <input type="checkbox"/> mail <input type="checkbox"/>
2. Granting/funding agency approval letter	email <input type="checkbox"/> mail <input type="checkbox"/>
3. REB/IRB approval letter	email <input type="checkbox"/> mail <input type="checkbox"/>
4. Current CV for the qualified investigator	email <input type="checkbox"/> mail <input type="checkbox"/>

We encourage applicants to submit by e-mail:

Canadian Cancer Trials Group: [cstb-internal@ctg.queensu.ca](mailto:cstb-internal@ctg.queensu.ca)

Application and supporting documentations are also accepted by mail:

Dr. Lois Shepherd  
Canadian Cancer Trials Group  
Cancer Research Institute,  
Queen's University  
10 Stuart Street  
Kingston, ON K7L 3N6