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| **GRANT APPLICATION** **(Title Page)** |

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| **Title** | Click here to enter text. |
| **Principal Investigator(s) & contact details** | Click here to enter text. |
| **Group Membership of Principal Investigator(s)***If other EORTC group, please indicate which group* | [ ] EORTC Quality of Life Group[ ] Other EORTC group: Click here to enter text. |
| **Organisation responsible for project/study (Legal sponsor)** | [ ] EORTC [ ] Other: Click here to enter text. |
| **Collaborators** | Click here to enter text. |

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| **Proposed start date**  | Click here to enter text. |
| **Proposed duration (in months)** | Click here to enter text. |
| **Planned budget** | [ ] Small (< €150,000)[ ] Large (€150,000 - €300,000) |
| **Type of project** | [ ] Study (module): *Generation of new data according to the Module Development Guidelines*[ ] Study (non-module): *Generation of new data with the aim of applying or further refining existing EORTC measures in a clinical or methodological context* [ ] Research project: *Without collection of new data (e.g., retrospective analysis of existing data sets)* |
| **Total research costs requested** | Click here to enter text. |
| **Project is in collaboration with an EORTC Disease-Oriented Group (DOG)** | [ ] Yes: please indicate here which group[ ] No |
| **Project is in collaboration with a non-EORTC group**  | [ ] Yes: please indicate here which group[ ] No |
| **Links to other already funded projects exist and will be clarified in the proposal** | [ ] Yes: please indicate here which project(s)[ ] No |
| **Two proposed external reviewers (with email addresses)** |  |

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| **Organisation(s) hosting the data of the study / project** | [ ] EORTC [ ] Other: Click here to enter text. |
| **Organisation(s) responsible for data management of the study / project** | [ ] EORTC [ ] Other: Click here to enter text. |
| **Organisation(s) responsible for data analysis of the study / project** | [ ] EORTC [ ] Other: Click here to enter text. |

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| **Outline of the proposal has been presented at an EORTC Quality of Life Group meeting and has been endorsed by the EC.** *Only projects that fulfil this criterion will be eligible for funding* | [ ] Yes | [ ] No |  |

| **Please indicate here any potential conflicts of interest that the Principal Investigators may have.** |
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| Click here to enter text. |

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| **PROJECT DESCRIPTION***Project description (including strategic assessment) are limited to a maximum of 5 pages. Use the boxes to enter the text, Calibri 11, single spaced.*  |

| **Background, Rationale and Preliminary work** |
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| Click here to enter text. |

| **Aims and Objectives***Please indicate your main objective and secondary objectives (if applicable).* |
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| Click here to enter text. |

| **Method***Describe how your method and procedure will answer the aims and objectives you have specified. Please make sure to indicate the study design (e.g., survey, cross-sectional, etc.), the primary and secondary endpoints (if applicable), the inclusion and exclusion criteria for your patient population, approximate number of centres, and expected number of patients.*  |
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| Click here to enter text. |

| **Brief statistical considerations including statistical method and estimation of sample size** |
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| Click here to enter text. |

| **Provisional Timetable and Milestones** |
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| Click here to enter text. |

| **Main output of the project***Please indicate the main deliverable and main outcome paper of this project.* |
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| Click here to enter text. |

| **References** |
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| Click here to enter text. |

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| **STRATEGIC ASSESSMENT***Use the boxes to enter the text, font Calibri 11, single spaced.*  |

| **Quality of Life Group strategic assessment***Does the study support the strategic direction of the group? Is the study in line with the latest SAC recommendations for the group? Has the study been formally endorsed by all involved EORTC groups?* |
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| Click here to enter text. |

| **EORTC strategic assessment***How does the project support the EORTC strategy? Will this study use the EORTC infrastructure? If yes, how will the EORTC infrastructure be used?* |
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| Click here to enter text. |

| **Feasibility assessment***Is the target population accessible to the group? Are there any issues that may influence study performance? What is the group’s past performance in running these kinds of studies?* |
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| **FINANCE***See EORTC QLG grant guidelines (Appendix C) for more details on budget.* |

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| **Budget** *If several institutions will receive money (except for patient payments), please create separate budget tables and a joint table, containing the total costs.* |
| **Item**  | **Year 1** | **Year 2** | **Year 3***(if applicable)* | **Year 4***(if applicable)* | **Total** |
| *Personnel* |  |  |  |  |  |
| *Travel to QLG meetings* |  |  |  |  |  |
| *Patient payment* |  |  |  |  |  |
| *Other costs* |  |  |  |  |  |
| *Overheads* |  |  |  |  |  |
| *Translation\** |  |  |  |  |  |
| *Other Headquarter costs\*\**  |  |  |  |  |  |
| ***Total*** |  |  |  |  |  |
| **Justification of costs** |
| Click here to enter text. |

\****Study (module):*** *For Phase I –III, if issue lists are translated by the collaborators, there are no additional translation costs. For Phase IV, if new translations are needed, please contact the Translation Unit (dagmara.kulis@eortc.org) in order to discuss the costs that have to be included in the budget.*

***Study (non-module):*** *If additional translations for questionnaires are needed (either EORTC or non-EORTC ones), please contact the Translation Unit (dagmara.kulis@eortc.org) in order to discuss the costs that have to be included in the budget.*

*\*\*If the project includes any form of workload for the EORTC Headquarters that are not related to translations (e.g., regulatory activities, database management, statistical support, etc.), please get in touch with the QLG Project Manager Melanie Beauvois (**melanie.beauvois@eortc.be**) at least two weeks before the submission deadline.*

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| **CV of Principal Investigator** *This section is limited to a maximum of 1 page.* |

Click here to enter text.

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| **CV of Co-Principal Investigator (if applicable)***This section is limited to a maximum of 1 page.* |

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