**CTN Study Proposal Form Instructions**

**Instructions**

* Use this form to provide a complete description of the proposed study and to describe why you are seeking CTN approval for your study. A description of the support you are requesting from the CTN and a justification for requesting this support is required. Refer to the *Study Submission and Review Process Guidance* document to review the types of support that the CTN is able to provide. The CTN Review Committees will use the *CTN Study Proposal Form*, along with the other required submission documents, as outlined in the *Study Submission and Review Process Guidance,* to evaluate your study and determine whether the CTN can approve the study. If approved, the Funding Committee will determine the research support that may be allocated. NOTE: If your primary source of funding has already met peer-review requirements (refer to the *Study Submission and Review Process Guidance* for further information), your application may not be required to be reviewed by the Scientific Review Committee.
* Read the CTN’s *Study Submission and Review Process Guidance* document before completing the *CTN Study Proposal Form* as failure to adhere to the requirements will disqualify you from this Program.
* The completed form must be saved as a PDF, compiled with the remaining submission documents, and emailed in the order provided on the *Full Submission Checklist* on the front page of the *CTN Full Submission Application Form.* Email to submissions@hivnet.ubc.ca.
* All sections of the *CTN Study Proposal Form* must be completed using a maximum of seven (7) pages – use Calibri 11 point font to complete the form. You cannot remove any questions or sections of this form. This instruction page is not included in the page count.
* A maximum of two (2) pages of references can be appended and are excluded from the page count.
* If applicable, a maximum of four (4) pages of tables and graphs may be appended and will be excluded from the page count BUT be sure to appropriately reference them in the text of your proposal to ensure the CTN Review Committees can readily refer to them (e.g., *refer to Table 1*).
* The Signed *Investigator Confirmation of Participation Forms* are excluded from the page count.

**If you have questions or require assistance, please email** **submissions@hivnet.ubc.ca**

**CTN Study Proposal Form**

(Maximum 7 Pages)

|  |  |
| --- | --- |
| **Core Affiliation**  | [ ]  CCM [ ]  CRC [ ]  PREV [ ]  VIT |

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| --- | --- | --- |
| **This study aligns with which CTN scientific priority? (Check all that apply)** | [ ]  Includes a key population: Indigenous people, MSM, from HIV/STBBI- endemic countries, people with mental health challenges; or People Who Use Drugs (PWUD)[ ]  Prevention - developing and testing: interventions for prevention and harm reduction AND/OR strategies for early detection and treatment of HIV and other STBBIs. | [ ]  Optimizing Health Outcomes – focuses on treatment strategies and improving health outcomes for persons living and aging with HIV and STBBIs.[ ]  Cure – seeking innovative cures for HIV[ ]  Other (add a brief explanation here): |
| **Type of study** | This study is:[ ]  Grant-funded [ ]  Industry-fundedIt is a: [ ]  Cohort Study [ ]  Clinical Research Study  | [ ]  Clinical Trial[ ]  Pilot Study[ ]  Implementation Science Project [ ]  Community-based Research Project [ ]  Other:       |
| **Study Name (long and short versions):** |  |

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| --- | --- |
| **Study hypothesis (in one sentence)**  |  |
| **Lay language description of the proposal (250 word maximum)** |   |

|  |  |
| --- | --- |
| **Number of Participants** | Total N:N per arm (if applicable): |

|  |
| --- |
| **Please list the participating sites and append the signed Site Investigator Confirmation of Participation Forms.**  |
| [ ]  Not applicable for project |
| (Add more lines as needed)Investigator (total)a.      b.      c.       | Institution                | Target enrolment at each site                 |
| **Justification for Single-Centre Project** | [ ]  Not applicable for projectIf applicable, provide full justification and/or rationale:  |

|  |
| --- |
| **BACKGROUND INFORMATION AND STUDY RATIONAL (Use the box provided below)** |
|   |
| **STUDY HYPOTHESIS AND DESIGN - This section must include: the 1) hypothesis; 2) study design (methodology and statistical analysis, including the rationale for the sample size calculation); 3) study population (including participant inclusion/exclusion criteria); 4) the specific study intervention details; 5) expected outcomes; and 6) expected results and implications for the field.**  |
|  |
| **Please list any barriers/potential risks that may impede the study and include mitigation strategies.**  |
|  |
| **Why have you submitted this study to the CTN? Please describe what you are requesting from the CTN and provide justification as to why you are requesting services and/or funding from the CTN.**  |
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