

Newcastle MRB Initial Enquiry Form

Please complete and return form to NMRBiobank@ncl.ac.uk

APPLICANT DETAILS					
Name:					
Institution/Organisation:					
Email address:					
PROJECT DETAILS					
Project Title					
Project Outline	<i>Please provide a lay summary of the proposed project (200 words)</i>				
INFORMATION REQUESTED					
Confirm whether request falls under generic ethics of Biobank	YES/NO	Sample check	YES*/NO	Other	YES*/NO
Confirm whether project sits within remit of research interests of Biobank	YES/NO	Data check	YES*/NO		
<i>*Please provide details below (e.g. sample type(s) and amount(s), clinical information required to accompany samples, any other enquiries regarding Newcastle MRB and project):</i>					

FOR NEWCASTLE MRB USE ONLY			
Date of receipt of enquiry			
Biobank sample/data check	YES/NO/NA	Date	
Feedback sent to applicant	YES/NO	Date	
<i>Feedback sent:</i>			