**IRB & DSRB Application Form**

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| **OFFICIAL USE ONLY** |
| **Doc Name :**IRB & DSRB Application Form– Study Team Member List for FCOI Declaration |
| **Doc Number :** 205-031 |
| **Doc Version :** 4.0 | **Date :** 27 November 2019 |

**Study Team Member List for FCOI Declaration**

**PROTOCOL TITLE:**

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| **Study Team Members:** *Note:* 1. *Please list any other team members who are not listed in Section B1(ii) of the Biomedical Study Application Form/Section B2 of the Population Health Study Application Form & are involved in the design, conduct or reporting of the research study (E.g. Research nurses, research coordinators, etc).*
2. *If there are changes to study team members, please update DSRB only at the point of study renewal.*

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| **Full Name** | **Study Role**  | **Institution** | **Department** | **Email****(Please provide the details used on the NHG Research Online Administration & Management [ROAM] portal, if applicable)** |
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