



# Recruitment Assistance Request Form for Researchers

<p><b>1 Date</b></p> <p>_____/_____/_____ (year/month/day)</p>	<p><b>2 Primary contact for the study</b></p> <p>Name:</p> <p>Role:</p>
<p><b>3 E-mail address</b></p>	<p><b>4 Contact</b></p> <p>Mailing address:</p> <p>Telephone number:</p>
<p><b>5 Institution  </b> Name of university/hospital/organization</p>	<p><b>6 Funding  </b> How will the project be funded? (government or private agency)</p>
<p><b>7 Team  </b> Who are the other key members of the research team? (including their institutional affiliation)</p>	<p><b>8 Name of Study</b></p>
<p><b>9 Purpose of Study or Research Objectives</b></p>	<p><b>10 Advancement  </b> What is the current stage of the study process? (e.g., funding application, ethics application, active data collection, etc.)</p>
<p><b>11 Letter  </b> Do you need a letter of support from Quebec Cancer Foundation? If so, please provide details (including deadline).</p>	<p><b>12 Approval  </b> Has this study received ethical approval? If so, please provide the name of the ethics committee.</p>



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<b>13</b>	<b>Participants</b>   How many participants are you expecting to recruit?	<b>14</b>	<b>Participants</b>   Eligibility Criteria
<b>15</b>	<b>Involvement</b>   What does participating in the study involve? (including estimated time required)	<b>16</b>	<b>Other relevant information</b>
<b>17</b>	<b>Calendar</b>   Please specify the anticipated timeline (e.g., Recruitment: Oct-Dec 2020; Data Collection: Jan-June 2021; Analysis: July-Dec 2021; Results Released: Winter/Spring 2022)		
<b>18</b>	<b>Sharing</b>   Are you willing to share an easy-to-read summary of your research results with QCF when the study is complete? If so, what is the expected completion date of the study?		
<b>19</b>	<b>Experience</b>   Do you have any previous experience with cancer? If so, please describe it.		
<b>20</b>	<b>Potential</b>   What is the potential of this study to improve the well-being of people with cancer or their loved ones?		

THANK YOU FOR TAKING THE TIME TO FILL OUT THIS FORM. PLEASE SEND IT TO [INFOCANCER@FQC.QC.CA](mailto:INFOCANCER@FQC.QC.CA)

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