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| --- | --- |
|  | BAHT Clinical Evidence Committee |

# BAHT Research Support Request Proforma

## Applicant Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  | |
|  | Last | First |  |  |  | |
| Title of Project: |  | | | | |  |
| Contact email |  | | | | |  |

## Introduction

|  |  |  |  |
| --- | --- | --- | --- |
| *Please provide an introduction we can share which will preface your research introducing the topic to your participants, tick to ensure you have included the following:* | | | |
|  | Who is carrying out the research- organization/ academic affiliation | | | | |
| |  |  | | --- | --- | |  | Clear research question & aim of the research | | | |
|  | Specific role of BAHT member(s) |
|  | How the knowledge will be used, benefits to clinicians/patients | | | |
|  | | | | |

## Methods

*Please provide a summary of your research proposal which includes the following:*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Justification of research method | | | |
| |  |  | | --- | --- | |  | Target population (inclusion/exclusion criteria) | |  | Demands on participants | | | |
| |  |  | | --- | --- | |  | Data protection plan | | | |
|  | Analysis plan |
|  | | | |

## Dissemination Plans

|  |  |
| --- | --- |
|  | Details on how you will share your findings e.g. BAHT e-bulletin, publication, conference presentation, social media |
|  |  |

## Thank you