Expression of Interest and Site Specific Assessment: CPA HREC

Please note: the focus of the Cerebral Palsy Alliance HREC is to review applications that involve the recruitment of CPA Clients or CPA Staff as participants, and the involvement of CPA Sites and other CPA resources to conduct the project.

Please complete the details below so that your project can initially be reviewed by CPA’s Research Governance Committee to assess the suitability of the proposed research at the site.

<table>
<thead>
<tr>
<th>Study details</th>
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<tbody>
<tr>
<td><strong>Project Title</strong></td>
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<tr>
<td><strong>Contact Person (phone and email)</strong></td>
</tr>
<tr>
<td><strong>Research Team (names/affiliations)</strong></td>
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<td><strong>Are CPA staff investigators?</strong></td>
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| **Has the project already been discussed with a CPA staff member?**  
(if yes, please provide details) |
| **Prior HREC approval received(if applicable)**  
HREC number:  
HREC site:  
Approval date: |
| **Anticipated start and finish date for the research project** |
| **Study budget** – please provide an explanation of how the project will be funded to ensure adequate financial planning.** |

Do you have a specific timeframe in which you must complete your project i.e. do you need to request an expedited review due to funding/candidacy requirements.

☐ No  
☐ Yes - please provide details:

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<tr>
<th>CPA Assistance</th>
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| **Is recruitment through the NSW/ACT Register requested?**  
☐ No  
☐ Yes – Contact data custodian Sarah McIntyre (smcintyre@cerebralpalsy.org.au) to seek a letter of support before submitting this form |
Do you wish to recruit/advertise through our:
- [ ] Facebook
- [ ] Clinic Sites

Please document requested frequency of advertising and planned duration of recruitment.

Provide details of the participant group you wish to recruit for your study, the number of participants you require and which CPA or other sites you are planning to recruit from.

Do you believe you will require the assistance of CPA staff members to complete your research? If yes please detail what staff is required, in which locations and how much staff time is required.

Please provide the details of the budget associated with the CPA staff time you have requested.

**Documentation**

Please ensure the following documents are attached in PDF format:
- [ ] Cover letter
- [ ] Study protocol/description
- [ ] HREC approval (if applicable) and any
- [ ] HREC approved documents (including for advertising the study; posters/social media etc.)
- [ ] NSW/ACT CP Register support letter attached (if applicable)

*Cerebral Palsy Alliance Human Research Ethics Committee (EC00402) is a registered NHMRC HREC in NSW / ACT. The scope of the HREC to review ethics applications is limited within their registered status, i.e., NOT a lead HREC.*