Pharmaceutical Clinical Trial Phase I Proposal Submission Form

General Information

Sponsor Name
Contact Person
Email Address
Phone Number
Study Details
Study Title
Investigational Compound Name
investigational Compound Name
Indication
Indication
Clinical Phase
Objectives
Study Design
Methodology
Number of Sites
Number of Sites
Number of Outrie etc
Number of Subjects
Expected Study Duration (months)
Key Inclusion/Exclusion Criteria

Regulatory and Ethics	
Ethics Committee/IRB Approval Required?	
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Regulatory Authority Approval Required?	
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Additional Comments	
Comments	