**Research Network member request form**

**Please complete this form to request a patient representative from our Research Network. Once completed, email your form to** **research@bowelcanceruk.org.uk****. We will aim to get back to you within one week of receiving your request.**

Please ensure that you allow for reasonable timelines to allow us to initially connect with members from our Research Network and then subsequently for them to have sufficient notice and time to provide input.

1. **Contact details**
Please include details of the person you wish us to communicate with regarding this request. Here, we require the name, job role, organisation and email address.

Name:

Job role:

Organisation:

Email address:

1. **Project details**
Please include in the space below a short paragraph (around half a page) that details what you’re setting out to do and why using simple (lay) language.
2. **Funding details**
Here we’re looking to understand which funder you are applying / have applied to, including the name of the funding call. Please also comment on any deadlines (if it’s pre-award help you are seeking).
3. **Research Network help**
**Please outline…**
**a.** what kind of patient input you are requesting (up to three people for a focus group, 1:1 telephone call with one person, review of lay section of application over email with ideally two volunteers)
**b.** the format of it (virtual, hybrid, in-person only)
**c.** any associated timelines (one-off help in late August 2024, help from early Sept 2024 about once every quarter for approx. one year)
**d.** Will any remuneration be provided, and if so, how much (if you have some budget, but need further guidance on this you may find [this link](https://www.nihr.ac.uk/documents/payment-guidance-for-researchers-and-professionals/27392) helpful.)
4. **Other**
If there is anything that you’d like to share that hasn’t been captured in the above questions that you feel is important to let us know then please use this space here.