**A picture containing diagram

Description automatically generated**

**Request to circulate research/project information to Royal College of Occupational Therapist Specialist Section – Major Health Conditions**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Member of RCOT  Member of RCOT SS Major health Conditions | Yes – Please provide membership number  Yes – Please provide membership number | No   No | |
| Contact Details (phone/email) |  | | |
| Title of Study |  | | |
| Name of research sponsor (usually a Trust, Employer, University) |  | | |
| Ethics approval obtained | Yes – please provide reference number, name of reviewing body and attach evidence of approval | | No – please state why |
| Request | Please provide details of why you would like to access the specialist section membership | | |
| Research Protocol/Project brief | Please attach a copy | | |
| Participant Information Sheet (if appropriate) | Please attach a copy | | |
| Signature  (or e –signature and attach to email) |  | | |
| Date |  | | |

Please return to Lara Cowpe, Education and Research Liaison, RCOT SS Major Health [rcotssmajorhealthconditions@gmail.com](mailto:rcotssmajorhealthconditions@gmail.com)   
*Please entitle email: FAO Lara, Education & Research Liaison*