



START

Schools Teaching Awareness of Randomised Trials

START COMPETITION 2020
TRIAL REGISTRATION FORM

Trial Registration Form

Name of school

Roll number

(5 letters and a number e.g. 12345a)

Name of principal

Name of lead teacher

Participating class(es)

Number of students

School contact

Phone number

Mobile phone number

(teacher)

Email

Name of trial

Tell us your START research question:

We would like to find out if: [example eating cheese]

Makes a difference to: [example: having nightmares]

In comparison to: [example: not eating cheese]



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I confirm that I have read all of the supporting documentation made available by the HRB-TMRN and that I am aware of the above mentioned class(es) or schools participation in this competition.

Signed

School Principal

Where did you hear about START?

- Tick here if you agree to joining our mailing list
- Please check this box if you are willing to receive information about research evaluating the START initiative. This will help us understand the impact of this initiative.

