**EMERGING INVESTIGATOR SUBMISSION FORM**

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| **The EI conducted a Literature Review prior to the study on which the study design was based*** No
* Yes
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| **Study Design*** No contribution by EI to study design, the study was already up and running
* A broader study was already running, but the EI designed the study from existing data fields
* The EI used a supervisor’s pre-existing study idea and helped design the study, but required significant inputs and ideas from co-investigators
* The EI used a pre-existing study idea, but contributed significantly to much of the study design
* The EI conceived the most of the ideas for the study and ran with the study design as PI, with only minor advice from the supervisor(s)
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| **The EI wrote the Ethics Submission and any required revisions*** No
* Some
* Yes
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| **Data Collection:** **Please outline the EI’s contribution to all aspects of data collection** **Please refer to 'How the Award is Judged' on the website for the criteria to be addressed. Please attach an additional page if you need more space.**  |
| **Data Entry*** Pre-existing database and data and ER made no/small contribution to data entry/cleaning
* Pre-existing database, but ER entered <50% of data and cleaned it all
* Pre-existing database, but ER added additional fields and entered/ cleaned >50% of data
* ER created a new database with significant support and entered/cleaned <50% of data
* ER created the database themselves, with only minor advice from the supervisor(s) and entered/cleaned >50% of data.
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| **The EI did all of the statistical analysis, with some help from a statistician/the supervisor (s)*** No
* Yes
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| **The EI created all Tables and Images in the Abstract (and Presentation as last slide)*** No
* Some
* Yes
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| **EI (with some support from supervisor(s)) interpreted all the Data findings & drew Conclusions*** No
* Some
* Yes
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| **This study is the subject of a higher degree:** * No
* Yes – Masters level
* Yes - PhD

Please provide degree details: (including Institution) |
| Signature of Supervisor or Head of Department. Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |