**Declaration of No Costs: New Non-funded Studies**

All studies include a series of research activities that have costs associated to them – even if the Sponsor of the study is not providing funding to cover these costs – whether the Sponsor is External, or the study is Sponsored by Queen Mary University of London or Barts Health NHS Trust.

Therefore, it is important to identify all the research activities and confirm or provide justification on how they will be covered or absorbed.

Please complete the below table providing justification on how each activity will be covered.

**Please complete the below table:**

|  |  |
| --- | --- |
| **Study Title:** |  |
| **IRAS ID** |  |
| **Institute/Department/Division:** |  |
| **Activities for Hosted Studies** | **Comment/Justification on how costs incurred will be covered**  *An example of a comment or justification could be that research activities are covered through your allocated research or teaching time or PA session, or via funding from another project (please provide details)*  *If any of the listed activities are not occurring in your study then please insert not applicable as appropriate.* |
| Screening tests/assessments to determine eligibility |  |
| Recruitment (patient approach, answering patient questions and consent) |  |
| Study specific staff training |  |
| Patient randomisation |  |
| Data Collection and Case Report Form completion |  |
| Patient Follow-up |  |
| Pass-through costs to cover Patient Travel, Refreshments, or Inconvenience Fees |  |
| Data storage archiving |  |
| Data Analysis |  |
| Other |  |
| **Additional Activities for Sponsored Studies (Where Sponsor is Queen Mary or Barts Health** | **Comment/Justification on how costs incurred will be covered**  *An example of a comment or justification could be that research activities are covered through your allocated research or teaching time or PA session, or via funding from another project (please provide details)*  *If any of the listed activities are not occurring in your study then please insert not applicable as appropriate.* |
| Study specific trial coordination |  |
| Registration of trials (mandatory for the first 4 IRAS categories) |  |
| Data Analysis |  |
| All costs associated with placebos-if applicable to the study |  |

If you are unsure whether costs will be incurred on your project or if you wish to cost your study for funding purposes, please contact the Pre-award Costings and Contracts team via email [([jrmo-helpdesk-preaward@qmul.ac.uk](mailto:jrmo-helpdesk-preaward@qmul.ac.uk))] or visit the JRMO website (<http://www.jrmo.org.uk/>) for further information.

If subsequent costs are incurred that have not been taken into consideration at this stage, please be aware that the matter may be taken up with your Head of Institute and costs may be debited against your department. By signing this form, you agree to these terms in order for your application to be processed.

|  |  |
| --- | --- |
| **CI/PI NAME:** |  |
| **CI/PI SIGNATURE:** |  |

|  |  |
| --- | --- |
| **INSTITUTE MANAGER OR CD/ PEER REVIEWER :** |  |
| **SIGNATURE:** |  |

**THANK YOU FOR YOUR TIME**