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| Study Title: |  | | | | | | | | |
| Name of Study Lead: |  | | | | | | | | |
| Institution: |  | | | | | | | | |
| Contact details | Email: | |  | | | | | | |
|  | Phone number | |  | | | | | | |
|  | Address | |  | | | | | | |
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| Summary of research aim |  | | | | | | | | |
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| Support requested from ENRICH Scotland  Please specify as clearly as possible: |  | | | | | | | |  | |
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| Is funding in place? | Yes |  |  | No |  | |
|  |  | |  | |  |  | |  | |
| Funding body: |  | | | | | | | | |
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| Participant requirements: | Main inclusion criteria | | | | | | | |  | |
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| Participant requirements: | Main exclusion criteria | | | | | | | |  | |
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| Recruitment Target: |  | | | | | | | |  | |
| Recruitment Deadline: |  | | | | | | | |  | |
| How will joining your study benefit the care home? |  | | | | | | | |  | |
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| Has ethical approval been received? | | | Yes | | |  | | --- | |  | | No | | |  | | --- | |  | |  | |
| If yes, please return with copy of ethical approval  Does/will ethics approval include permission to share study information on social media? | | | Yes | | |  | | --- | |  | | No | | |  | | --- | |  | |  | |
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| Any other supporting information: |  | | | | | | | |  | |
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**Please provide the following documents if applicable:**

Ethics Approval Letter

Study Protocol

Participant Information Sheet