DEPARTMENT OF NEUROLOGYREQUEST FOR SUPPORT OF A BIOSTATISTICIAN

Send Request to:	Kristie Shirley Phone 615-936-8950	Kristie.shirley@vumc.org
	1 Holle 013 330 0330	☐ Manuscript ☐ Grant
For abstracts/manusc department biostatis http://biostat.mc.va	tical effort (proportional to their nderbilt.edu/wiki/Main/Clinics	on is that faculty with funding sources will help support our projects), or will use VICTR resources for the project. provides information on VICTR clinics and information on VICTR biostatistical support.
For abstract/man	uscript support, answer the follo	owing questions:
I have funding av	ailable for this project	Yes No
If no, I considered	using VICTR for this project	Yes No (if not, please indicate reason):
PI NAME (if a resident or fellow, please list faculty you are working with):		
PROJECT DESCRIPT	TION:	
	CISTICAL SUPPORT (what you	need biostatistician to do):
<u>DURATION OF PROJECT:</u> IF SUPPORT IS FOR A GRANT, LIST SUBMISSION DATE (biostats need at least 2 months to prepare text for grants)		
PI SIGNATURE:		
DATE SUBMITTED:		
This section to be con	npleted by Administration	
AWARD DURATION	V:	
APPROVED BY:		DATE:
APPROVED CENTER	R NUMBER:	COMPLETION DATE: