**In accordance with the Data Protection Act 1998, the personal data provided on this form will be processed by FMA UK, and may be held on computerised databases and/or manual files.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Section 1: Contact information** | | | |
| **Title** |  | **Job title** |  |
| **Name** | | |  |
| **Organisation/Institution** | | |  |
| **Type of Organisation/Institution** | | |  |
| **Work address:** | | | |
| **Main telephone:** | | | **Email:** |
| **Twitter / Socials / Website** | | |  |
| **What is your role in the study?** | | |  |
| **Will this be part of an academic qualification? If so what will it be?** | | |  |

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| **Section 2: Research opportunity details** | |
| **Title of project:** | |
| **Nature of research study:**       (Online Survey, Teams / in person interview etc) | |
| **Please give details of the nature of the request to recruit or involve people with fibromyalgia (e.g. to recruit participants, or to get input on the design of a research study):** | |
| **Study Type:** (Undergrad, MSC, PHD, NIHR/Funded, Other) |  |
| **How many people do you hope to recruit to the opportunity?** |  |
| **Are there gender requirements** | Male  / Female  / Both |
| **Closing date for recruitment:** (I*t can take up to 3 weeks to assess and advertise an opportunity)* |  |
| **Research sponsor(s), if applicable:** | |
| **Research funder(s), if applicable:** | |
| **Ethics approval?** / Date Obtained: | |
| If yes, please attach a copy of the ethics/governance approval documents or justify if approval has not yet been received.  If no, please justify why ethics/governance approval is not required. | |
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| **In no more than 300 words, please give a summary of the proposed research activity,** including:   * background to the work and organisation(s) involved; * activity to be undertaken**;** * method of involvement (e.g. online, telephone, email, meetings); * frequency of involvement (e.g. number of meetings per year); * period of involvement (e.g. number of weeks/months); * time needed for any additional involvement (e.g. reading time); * what support is provided (e.g. mentoring, induction, training, etc.); * how the research will benefit people with fibromyalgia in the future.   *(If you are conducting a project on behalf of a third party, please include information about this organisation.)* | | | |
|  | | | |
| **Type of involvement requested (please tick relevant boxes):** | | | |
| Contribute to research directly as a participant |  | Get involved in campaigns |  |
| Comment on documents or publications |  | Attend an event or conference |  |
| Comment on issues affecting people with fibromyalgia |  | Respond to surveys |  |
| Join a committee or steering group |  | Join a panel |  |
| Speak in public |  | Share experiences |  |
| Other (please state): | | | |
| **Where in the UK will your opportunity take place and in what type of venue (if applicable)?** | | | |
| **If the research is being funded by a pharmaceutical company, please state the proportion of funding:** | | | |
|  | | | |

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| **Section 3: Eligibility criteria for research opportunity** |
| **Type of people associated with fibromyalgia:** |

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| --- | --- | --- | --- | --- | --- |
| Individual with fibromyalgia | Parent/Carer | Family | Friend | All | Other |

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| **Any other specific experience required:** |  |
| **Are you looking for participants from a particular part of the UK?** |  |

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| **Section 4: Obligations to research participants** | |
| **How will you respond to let people know whether or not they have been successful in being selected for this research opportunity?** | |
|  | |
| **What steps will be taken to ensure that information about participants is stored and used in compliance with the provisions outlined in the Data Protection Act 1998?** | |
|  | |
| **Will you provide the information to participants as detailed in the guidelines accompanying this form?** |  |
| **How will you feedback to people regarding how their involvement has made a difference after their involvement in your opportunity ends, and how will you inform participants of the outcome of the research?** | |
|  | |
| **If required, can you provide information appropriate to the needs of the participant (including foreign languages and Braille)?** |  |
| **Will out of pocket expenses be paid?**  If yes, please give details of what is covered and how this will be done (for example, travel booked in advance, or reimbursed on the day): | |

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| **Section 5: Template for online and email advertisement** |
| **Information about your research study will appear on our website and social media platforms in the format given below. Please ensure that you use plain English to describe your study, and please keep the text relevant, short and engaging.** |
| **Lay study title**:  **Institution**:  **About the study**:  **Type of opportunity**:  **When will this study be recruiting?**  **What will participants be asked to do?**  **Who can take part?**  **Who is conducting the research?**  **Who has reviewed the study?**  **How will the study benefit people with fibromyalgia?**  **Expenses**:  **What next / who to contact**: |
| The above will be used to construct a social media post etc to advertise through our channels. Feel free to share with us digital posters and royalty-free images to be used in advertising your research opportunity. Our primary post will be on our twitter feed and if you have a twitter account we can tag your account to the post.  Please include your Twitter account: e.g.: <https://twitter.com/fmauk/> |

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| **Section 6: Declaration**  *Please initial in the second column.* | | |
| I/we understand that allowing recruitment of people living with fibromyalgia through Fibromyalgia Action UK does not imply that Fibromyalgia Action UK is in any way responsible for the opportunity and is, therefore, not liable for any claims concerning negligence, harm or oversight that might arise during the course of the research opportunity. | |  |
| I/we agree to provide Fibromyalgia Action UK with a summary report of the findings once they are made publicly available (if applicable) and feedback of the opportunity. | |  |
| I/we agree to provide Fibromyalgia Action UK with advance notice of any press releases or publications arising from the research. | |  |
| I/we agree to make every attempt to publish the findings of the research regardless of a positive or negative outcome. | |  |
| I/we agree to fulfil all the obligations to research participants as detailed in section 4 of the application form. | |  |
| I/we declare any potential conflicting interests here: | |  |
| Research applicant’s name: | Date: | |

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| **Section 7: Monitoring** |
| How did you hear about involving people with fibromyalgia in research through Fibromyalgia Action UK? |
|  |

**Thank you for taking the time to complete this form.**

Please return the completed form to: [**research@fmauk.org**](mailto:research@fmauk.org)**.**

We will communicate any queries with you and let you know when the study has been published. Some studies may require a conversation prior to publishing. If you feel a chat is required then we can send a Calendly link to book a Team’s meeting.