SARC Concept Proposal Form

1. **Principal Investigator:**
	1. Institution:
	2. Mailing Address:
	3. Phone:
	4. E-mail Address:
2. **Concept Title:**
3. **Investigational Agent:**
4. **Rationale for Study:**
5. **Objectives:**
	1. Primary Objective:
	2. Secondary Objectives:
6. **Endpoints:**
7. **Study Design:**
8. **Number of patients (in total and by treatment group):** *To be completed with input from SARC statistician*
9. **Population:**
10. **Brief Statistical Considerations:** *To be completed with input from SARC statistician*
11. **Study Duration:**
12. **Funding Source(s) Available: Yes** [ ]  **No** [ ]
13. **Safety:**
14. **Pharmacology Studies Proposed:**
15. **Biomarker Assessment/Correlative Studies Proposed:**
16. **References:**