**Non-Confidential Expression of Interest Form**

Please refer to the guidance notes for investigators before completing your form to provide the relevant details summarising your Expression of Interest (EOI). This information will be reviewed internally by CRUK's Centre of Drug Development Combinations Team, the Combinations Alliance Joint Steering Committee and the company of interest.

By sending this application to the Combinations Alliance you confirm sponsorship, ECMC lead support and CTU capacity and capability to open study within 12 months of New Agents Committee (NAC) or Clinical Trial Awards and Advisory Committee (CTAAC).

|  |  |  |
| --- | --- | --- |
| **General Information** | | |
| Date of call |  | |
| Type Of EOI  *(Delete as appropriate)* | ECMC *(early phase trials)*  NIHR *(later phase trials)*  Speculative *(no drugs yet sourced)* | |
| ECMC/ Institution |  | |
| Lead CTU |  | |
| Current proposal  *(Delete as appropriate)* | Submission Ready  Requires additional preclinical data  Compound sourcing required *(add contact details if you have an established relationship)* | |
| Lead Proposer Name |  | |
| Role Title |  | |
| Email Address |  | |
| Telephone Number |  | |
|  | | |
| **EOI Details** | | |
| Drug A |  | |
| Class |  | |
| Other names |  | |
| Stage  *(Delete as appropriate)* | Preclinical/ Phase I/ Phase II/ Phase III | |
| Drug B |  | |
| Class |  | |
| Other names |  | |
| Stage  *(Delete as appropriate)* | Preclinical/ Phase I/ Phase II/ Phase III | |
| Additional information |  | |
|  | | |
| **Scientific Rationale for Combination** | |  |
| Scientific rationale |  | |
| Study design  *(including objectives and endpoints)* |  | |
| Patient population |  | |