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| **Site ID / Name:** |  |  | **Principal Investigator:** |  |

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| **A** | Local set-up and obtaining local approvals | **H** | Other (please list): | **P** |  |
| **B** | electronic Investigator Site File maintenance | **I** | Other (please list): | **Q** |  |
| **C** | Completion of eCRFs on REDCap system | **J** | Other (please list): | **R** |  |
| **D** | Resolution of data queries via RedCap | **K** |  | **S** |  |
| **E** | Point of contact for data queries | **L** |  | **T** |  |
| **F** | Data Validation | **N** |  | **U** |  |
| **G** | Archiving of study related documents | **O** |  | **V** |  |

\*\* **PI Initials**

By initialling an entry, I confirm that the person completing the entry is authorised to perform the study procedures in the tasks section, and that the person is qualified to undertake these tasks. I also confirm that the person is appropriately informed about the study protocol and relevant study procedures.

| **Name (please print)** | **Trial Role**  **(Data collector, Data entry, Training Champion)** | **Tasks Delegated by PI (see legend above)** | **Initials** | **Signature** | **Date of signature** | **Date of Duties** | | **PI Initials\*\*** | **Date of PI Initials** |
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| **From**  **(dd-MMM-yyyy)** | **To**  **(dd-MMM-yyyy)** |
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**The PI should sign below during the Site Close-Out visit**

I have reviewed the information on this log and have found it to be accurate. All delegated duties were performed with my authorisation.

**PI Signature: PI Initials: \_\_\_\_\_\_ Site close out Visit Date: \_ \_ / \_ \_ \_/ \_ \_ \_ \_**