**Survey Review Request Form**

Title of survey: Click or tap here to enter text.

Principal Investigator: Click or tap here to enter text.

Sponsor: Click or tap here to enter text.

Background (Limit 3 paragraphs) Click or tap here to enter text.

Objectives: Click or tap here to enter text.

Target audience (check all that apply): **Note: If survey is aimed solely at a particular SWOG Committee, please contact the appropriate Chair(s).**

[ ]  Entire SWOG membership

[ ]  Principal Investigators

[ ]  Physicians

[ ]  Translational scientists

[ ]  Nurses

[ ]  Research Assistants/Associates

[ ]  Patient Advocates

[ ]  Committee Chairs

[ ]  Executive Officers/Leadership

[ ] Staff

[ ] Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Survey duration (How long do you want it open): Click or tap here to enter text.

Expected outcome: Click or tap here to enter text.

Data protection policy: Click or tap here to enter text.

**Notes:**

1.Final review shall be made by the SWOG Executive Committee. If approved, SWOG will distribute the survey electronically via a link provided by the Principal Investigator. The release and the timing of the survey will be left to the discretion of SWOG’s Director of Operations and Protocols. The timing will be communicated to the Principal Investigator prior to the release of the survey. Reminders to the listserv can be negotiated separately.

2. Any changes to the survey, intended respondents, or plan must be communicated to SWOG as soon as possible.

3. Results of a survey are not to be recognized as an official opinion of SWOG or The Hope Foundation for Cancer Research.

4. Investigators will be required to provide a report detailing response rates and outcomes from the survey to the Digital Engagement survey subcommittee, including plans for publication or eventual dissemination to a broader audience.