Cover sheet for Approval / Endorsement / Support requests

Document Title:	
Document Type:	
Corresponding person for the submission:	
Corresponding email:	

Please indicate the nature of the request:

☐ ASID Endorsement

☐ ASID Support (financial or in-kind as approved by ASID CEO)

☐ ASID Event Endorsement (approved by ASID CEO)

Please indicate if any of the ASID subcommittees are relevant in assessing the request (select all that apply):

ANZMIG	**Clinical Research Network**
ANZPID	Trainees Committee
HICSIG	Advocacy and Policy
ICHSIG	Equity and Diversity
VACSIG	New Zealand subcommittee
VH2SIG	Other:
ZOOSIG	(Please specify)

Have you sought endorsement / support from other professional bodies?

No

Yes – *Please list the societies / organisations / bodies:*

Already approved the submission	Currently seeking approval from

Please indicate a requested date or approximate timeframe for feedback on this submission: *(Please note, ASID will attempt to accommodate requests wherever possible. However, responses may be delayed in periods of high demand.)*

Requested date	Or requested timeframe