

**Request for user account and declaration of completion of training
for ALEA e-CRF**

Accounts can only be requested for studies performed by the Clinical Trial Center

User information

Name:	
Personal e-mail address (for user logon):	
Organization:	
Are you already in the possession of an ALEA e-CRF account for any other Clinical Trial initiated by the Erasmus MC?	<input type="checkbox"/> Yes, namely: <input type="checkbox"/> No

Study information

Name of study/studies for which access is required:	
Site name(s): (hospital(s) for which access is required in this study)	
Role in ALEA e-CRF system:	<input type="checkbox"/> Local data manager <input type="checkbox"/> Central data manager <input type="checkbox"/> Local investigator <input type="checkbox"/> Monitor <input type="checkbox"/> Other:

Agreement

<p>I understand that the user name and password I will receive for my ALEA e-CRF user account constitute an electronic signature.</p> <p>I understand that electronic signatures are legally binding and have the same meaning as handwritten signatures.</p> <p>I hereby declare that I have reviewed and understood the instructions about the correct use of the ALEA e-CRF system.</p>	
Date:	Signature: