

# ACT questionnaire

Download this PDF file, fill in the form and send it to [ACT@ous-hf.no](mailto:ACT@ous-hf.no)

**1. Project title (max 240 characters):**

**2. PI or Responsible person (max 400 characters):**

*Name, affiliation and contact info.*

**3. Sponsor or funding information (max 400 characters):**

- 4. Scientific background and preliminary data** (max 2000 characters ~1 A4 page):  
*Describe the scientific background and the data collected in vivo and in vitro if appropriate.*

**5. Type of support needed (max 400 characters):**

- Process development
- Regulatory support
- Manufacturing support
- Other (please specify below)

**6. Summary of the project:**

*Fill all the relevant sections to the best of knowledge.*

**a. Rationale/therapeutic concept (max 700 characters):**

**b. IP status/Ownership of data (max 700 characters):**

**c. Regulatory status (max 700 characters):**

**d. Ethical permits/Biobank permits (max 700 characters):**

**e. Manufacturing Process including current methods (max 700 characters):**

**f. Equipment required (at ACT and in other facilities) (max 700 characters):**

**g. Reagents required (max 700 characters):**

**h. Estimated time requested (range) and proposed starting date (max 700 characters):**

**i. Expected results/outcome (max 700 characters):**

**7. Risk assessment for the project** (max 700 characters):

*Indicate major areas in the project where risk factors have been identified (e.g. technical difficulties, source of material, clinical trial planning, etc.)*

**8. Other comments/requests** (max 700 characters):