

## Pre-Course Questionnaire - To be completed by all delegates

Please complete and sent to [training@icr-global.org](mailto:training@icr-global.org) or fax to +44 01628 501 709

Course Title: M22 Foundation in Good Clinical Practice (GCP)

Date: 05 July 2023

**Name:** .....

**Company / Hospital:** .....

**Position / Job Title:** .....

**How much experience of clinical trials do you have? (Years)**

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**What are you hoping to get out of the day?**

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**State one issue/problem you would like discussed at the meeting**

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**Special Dietary Requirements**

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\* The ICR will work with the venue catering team and endeavour to accommodate specific dietary requirements e.g. Vegetarian/Vegan/Gluten Free - however it may not be possible to cover all requests for dietary preferences.