



**Alliance *for* Lupus Research**

PREVENT. TREAT. CURE.

**Application Form:  
REQUIREMENTS FOR POSTING CLINICAL TRIAL  
RECRUITMENT INFORMATION to Alliance for Lupus Research  
Website**

Attached is the application form for consideration of listing a clinical trial flyer on the Web site of the Alliance for Lupus Research (ALR). Please fill out the form, return it to the ALR and also provide the following additional information that we require to consider your request to post a lupus clinical trial on the ALR's website:

- 1) Proof (for a single-site study) or assurance (for a multicenter study) that all sites listed are IRB-approved to begin enrolling patients.
- 2) Whether the study is listed on [clinicaltrials.gov](http://clinicaltrials.gov)

Thank you so much. We know that we all share the goal to encourage and support the best possible lupus research around at every stage of the process to bring new treatments to people with lupus everywhere.

If you have questions about the form or your application, please contact: Diomaris Gonzalez, Research Administration at [dgonzalez@lupusresearch.org](mailto:dgonzalez@lupusresearch.org) or 646-884-6056.

**ALLIANCE for LUPUS RESEARCH: WEB CLINICAL TRIALS  
LISTING APPLICATION FORM**

Name:

Email Address:

Institution:

Date information provided:

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Agent:

Did the ALR provide funding for any research leading up to this clinical trial and/or agent? If yes, please specify grant.

Possible mechanism/mode of action:

Study Title/Purpose:

Study Phase:

Dose (include frequency and schedule) and route of administration:

Starting Date (first patient enrolled):

Period of Observation (for each participant):

Primary investigator and institution:

Type of Lupus Studied:

Specify Treatment of Each Study Arm and control (e.g., Rx vs. PBO, crossover):

Number of Patients in each group:

Blinding:

Inclusion criteria:

Exclusion Criteria:

Primary outcome measure(s):

Secondary outcome measure(s):

Tertiary outcome measure(s):

Trial Funding:

Is this study listed on [www.clinicaltrials.gov](http://www.clinicaltrials.gov)? (yes or no)

If yes, please provide the ClinicalTrials.gov Identifier:

Please provide a name and contact information for potential patients/trial enrollees (please include phone number for our constituents who do not have access to email):

**Please let us know when the trial closes,  
so that we can remove this information.**

**Please return this information & a flyer to post on the ALR  
website via email to:**

**Diomaris Gonzalez, Research Administration**  
**[dgonzalez@lupusresearch.org](mailto:dgonzalez@lupusresearch.org)**

**The ALR will notify you within 30 days as to if we will be posting  
to our website, information on the trial you have submitted.  
Thanks for all of your work.**