



Delegation of Authority (Sponsor)

I <<Name>>, Principal Investigator for << Study Acronym>> entitled <<Study Title>> have ensured that the individuals listed below are properly qualified and have received appropriate training. I have delegated the following responsibilities to the individuals named below, and assert that these duties/functions will be performed under my supervision.

Principal Investigator

Date

Printed Name	Signature/Initials	Role within Study Team	Authorized Duties/Functions (list all that apply)	Start Date	End Date	PI Initials/Date
		Principal Investigator				

Key Delegated Tasks (Sponsor)

1	Regulatory submissions
2	Ethics submissions
3	Development of site agreements
4	Financial tracking and management
5	Development of informed consent documents
6	Randomization system set-up and maintenance
7	Development of case report form
8	Management of study product inventory
9	Compliance assessments
10	Site monitoring and source verification
11	Data management and query resolution
12	Assessment of adverse events
13	Other: please specify:
14	Other: please specify:
15	Other: please specify:
16	Other: please specify:
17	Other: please specify:
18	Other: please specify:
19	Other: please specify:
20	Other: please specify: