

International Cancer Expert Corps

1608 Rhode Island Avenue, NW, Suite 243, Washington, DC 20036
 70 East 96th Street, Suite 11A New York, NY 10128



APPLICATION TO BECOME AN ICEC HUB

Name of Institution:

Street Address					Suite/Unit #	
City		State/Province		Postal / Zip Code		Country
Phone			Fax			E-Mail
Web Site						
Languages:	English	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Other (Please Specify):		
	French	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
	Spanish	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
	German	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

Name of Leader / PI:

Street Address					Suite/Unit #	
City		State/Province		Postal / Zip Code		Country
Phone			Fax:			E-Mail
Web Site						

Name of Co-Leader:

Street Address					Suite /Unit #	
City		State/Province		Postal / Zip Code		Country
Phone			Fax:			E-Mail
Web Site						

Name of Administrative Manager:

Street Address					Suite/Unit #	
City		State/Province		Postal / Zip Code		Country
Phone			Fax:			E-Mail
Web Site						

RESOURCES AND COMMITMENT: DESIGNATED SPACE FOR ICEC

Description of Facility:			
Number of Offices:		Number of Exam Rooms:	
Number of Hospital Beds:			

Radiology Equipment		
CT Scanner (s):	MR Scanner (s):	
Nuclear Medicine:		
PET Scan:	Bone Scan:	
Radiation Therapy:		
LDR Brachytherapy	HDR Brachytherapy	
Cobalt-60 Machine (s):	Linear Accelerator (s):	
OTHER:		
IT RESOURCES		
Telecommunication		
Telecommunication Visual Communication (Skype)		
PERSONNEL COMMITMENT TO ICEC HUB		
Leader / PI	Hrs./Wk. (min 4hrs)	
Co-Leader / Co-PI	Hrs./Wk. (min 4hrs)	
Admin. Manager	Hrs./Wk. (min 4hrs)	

OTHER PERSONNEL																																												
Medical: <table border="1"> <tr><td>Medical Oncologists</td><td></td></tr> <tr><td>Radiation Oncologists</td><td></td></tr> <tr><td>Pediatric Oncologists</td><td></td></tr> <tr><td>Radiologists</td><td></td></tr> <tr><td>Nuclear Medicine</td><td></td></tr> <tr><td>Pathologists</td><td></td></tr> <tr><td>Surgeons</td><td></td></tr> <tr><td>Surgical Oncologist</td><td></td></tr> <tr><td>Pharmacologists</td><td></td></tr> <tr><td>Psychologists</td><td></td></tr> <tr><td>Public Health Specialists</td><td></td></tr> <tr><td>Nurses</td><td></td></tr> </table>		Medical Oncologists		Radiation Oncologists		Pediatric Oncologists		Radiologists		Nuclear Medicine		Pathologists		Surgeons		Surgical Oncologist		Pharmacologists		Psychologists		Public Health Specialists		Nurses		Science, Non-MD: <table border="1"> <tr><td>Radiologic Physics</td><td></td></tr> <tr><td>Medical Physicists</td><td></td></tr> <tr><td>Epidemiologists</td><td></td></tr> <tr><td>Prevention and Screening</td><td></td></tr> <tr><td>Technologists</td><td></td></tr> <tr><td>Basic and Translational Scientists</td><td></td></tr> <tr><td>Statisticians</td><td></td></tr> <tr><td>Social Scientists</td><td></td></tr> <tr><td>Regulatory Affairs Specialists</td><td></td></tr> </table>	Radiologic Physics		Medical Physicists		Epidemiologists		Prevention and Screening		Technologists		Basic and Translational Scientists		Statisticians		Social Scientists		Regulatory Affairs Specialists	
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CURRENT "TWINNING RELATIONSHIPS"		
Potential ICEC Center: Name of Institution: Leader:		
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IN WHAT RESEARCH GROUPS (NOW OR IN PAST) DO YOU PARTICIPATE:		
DO YOU PARTICIPATE (NOW OR IN PAST) IN INDUSTRY SPONSORED TRIALS:		
SIGNATURE OF THE APPLICANT:		
DATE:		

APPLICATION REVIEWED BY:		
HUB COMMITTEE:		
ACCEPTED	REJECTED	PROVISIONAL
SIGNATURE:		
DATE:		

APPLICATION REVIEWED BY:		
ICEC CENTRAL		
ACCEPTED	REJECTED	PROVISIONAL
SIGNATURE:		
DATE:		

COMMENTS: