**项目启动和培训签到表**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 项目编号： | | | | |
| 临床试验项目名称： | | | | |
| 申办方/CRO： | | | 主要研究者： | |
| 专业科室： | | | 启动和培训日期： | |
| 研究者 | | | | |
| 姓名 | 科室 | 职称/职务 | | 签字 |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |
|  |  |  | |  |