

🍏 Investigator Support Program Application

Email the completed application to research_proposals@apple.com.

Project Overview

Project Title	
Principal Investigator (PI) Name <i>Please include the department if applicable.</i>	
Institution/Organization <i>Please include the address.</i>	
Primary Contact Name and Email <i>Please include, if not the same as the PI.</i>	
Co-Investigator(s)	
Co-Investigator Institution(s)/ Department(s)	
Study Site(s) <i>Please list the location(s) where participants will be enrolled/onboarded, if different from PI's institution listed above.</i>	

Prior Work

Briefly summarize prior work demonstrating investigator/institutional expertise and ability to carry out the described work.

Project Summary/Design

*Provide a project description, including study objectives, hypotheses, endpoints, safety outcomes, and experimental design details/schematic, if applicable. Please **do not** disclose any intellectual property, confidential, and/or proprietary information here or elsewhere within this proposal.*

<p>Will other non-Apple devices be used in this study? <i>Please identify the devices, and describe how these devices will be used, if applicable.</i></p>	<p>Yes No</p>
<p>Planned Number of Subjects (N)</p>	
<p>Anticipated Study Ethics Board (e.g. IRB) Approval Date</p>	
<p>Anticipated Start Date (First subject in)</p>	
<p>Study Duration (Length of enrollment period, subject participation, and total study duration)</p>	
<p>Study Visit Schedule</p>	
<p>Enrollment Criteria</p>	
<p><u>ClinicalTrials.gov</u> NCT Number (If applicable)</p>	
<p>Financial Support (If applicable)</p> <p><i>Briefly describe forms of financial support applied for and the outcomes, if known, of these applications. If other forms of support restrict institutional rights (e.g. intellectual property, commercialization, etc.), please explicitly describe those limitations.</i></p>	

Requested Support

	Total Quantity Requested*	Preferred Quantity of Watches by Size: S / L	Preferred Quantity of Bands by Size: S/M, M/L	Justification
Apple Watch	_____	_____ S _____ L	_____ S/M _____ M/L	<i>Please provide justification for the requested device series/model (e.g. sensor(s) needed) and confirm that the experimental design described includes power analyses and sufficient justification for the requested device quantity.</i>
Other Apple Device(s) to Be Used in the Study				

*Please note that requests for large quantities and/or the latest series/models may impact or delay acceptance of your application. If devices are awarded, the specific details regarding the awarded units will be outlined in the terms of agreement. The fulfillment of preferred devices may vary based on the available inventory at the time of the award.

App/Platform

<p>Please list any existing apps to be used in the study <i>Please include any AppStore links if applicable.</i></p>	
<p>Are you building an app for this study?</p>	Yes No
<p>Who is the app developer?</p>	
<p>Do you need a developer/support to build the app?</p>	Yes No
<p>Does your app use or plan to use ResearchKit?</p>	Yes No
<p>Do you plan to modify ResearchKit for your project?</p>	Yes No
<p>Does your app use or plan to use CareKit?</p>	Yes No
<p>Do you plan to modify CareKit for your project?</p>	Yes No
<p>Are you willing to contribute your modifications to ResearchKit and/or CareKit back to the open source community?</p>	Yes No N/A
<p>Do you plan to collect HealthKit data? <small>(https://developer.apple.com/documentation/healthkit/data_types)</small> <i>Please include HealthKit data types if applicable.</i></p>	Yes No
<p>Do you plan to collect other data digitally (e.g. surveys, consent, etc.)? <i>Please include the data types if applicable.</i></p>	Yes No
<p>Do you plan to collect SensorKit data? <small>(https://developer.apple.com/documentation/sensorkit)</small> <i>Please include SensorKit data types if applicable.</i></p>	Yes No
<p>Does data collection include any Health features listed on the Feature Availability page? <small>(https://www.apple.com/watchos/feature-availability/)</small> <i>Please list the feature(s) if applicable.</i></p>	Yes No
<p>Do you plan to collect non-health data? <small>(e.g. location, accelerometer, etc.)</small> <i>Please list the data type(s) if applicable.</i></p>	Yes No

User Experience

User Experience

Briefly describe the envisioned user experience.

If applicable:

- For app-based user experiences, append flow charts/wireframes as available.
- For in-person encounters, describe the purpose, anticipated time commitment, and experience.
- Do you expect to collect data through other channels (e.g. phone calls, in-person clinic visits, labs)?
- Briefly describe your data monitoring plan, if any.

Data Privacy

<p>Where will study data be stored? (e.g. private cloud, dedicated server, local computer, REDCap, EMR, etc.)</p>	
<p>How will study data move from a participant's device to where study data will be stored? (e.g. typed in locally, copied in clinic from a participant's device, uploaded to private cloud, etc.)</p>	
<p>How will user privacy and data security be ensured?</p>	