

**Canadian Cancer Trials Group
Remote Roster Administrator (RRA) Designation Form
For Non-Member Centres**

Centre Name: _____

Centre Code: _____

Each centre must designate a minimum of 2 RRAs. The maximum number is 3.

Name of Designated RRA: _____

RRA's Signature: _____ Date: _____

Name of Designated RRA: _____

RRA's Signature: _____ Date: _____

Name of Designated RRA: _____

RRA's Signature: _____ Date: _____

Please list the names of any previously assigned RRA's to remove:

**Trial Qualified
Investigator:**

Name

Signature

Date

Return by email to: roster@ctg.queensu.ca