

uMOVE core facility: Application Form

Date of Application:

Project Title (Swedish or English):

Project Leader/Principal Investigator: (name, department/school/organisation, e-mail, tel.):

Short summary of project plan (Swedish or English):

Equipment to be used:

□ Accelerometer (ActivPAL/ActiGraph)

□ Electronic Walking Mat (GAITRite)

□ Mobil motion analysis (APDM)

□ 3-dimensionell rörelseanalys i labb (VICON, kraftplattor, EMG)

 \Box Clinical motion analysis

 \Box The Facility/Other: ____



Expertise for using the equipment within the research/project group (including data management and analysis):	
Desired assistance (user guide, data collection and data management):	
Location for use of the equipment:	
Estimated extent of data collection; num test period when equipment is needed:	ber of hours/study participants and length of
Planned project start:	Planned project end:
 Ethical vetting (EPN) Approved, Decision date/number: Application submitted The application will be submitted: Not applicable 	1

Send completed form to <u>umove@ki.se</u> (Subject: Project_uMOVE)