*Include key personnel and file their CVs in the Investigator Site File. Amend the responsibility key below as applicable.*

**Responsibility key:**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Screening and randomization | 4. Edit data in the eCRF | 7. Blinded follow-up assessment | 10. |
| 2. Obtain informed consent | 5. Sign off data in the eCRF | 8. Blood sampling | 11. |
| 3. Enter data in the eCRF | 6. Blinded neurological evaluations and tests | 9. | 12. |

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| **Name** | Position in the study | Responsibilities (indicate using the numbers above) | **Signature** | **Initials** | **Date of delegation by PI** (dd-mmm-yyyy) | **PI**  **Initials** | **Date of**  **discontinued delegation by PI**  (dd-mmm-yyyy) | **PI Initials** |
|  | Site Principal Investigator (PI) | N/A |  |  | N/A | N/A | N/A | N/A |
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To be signed and dated at the end of the trial. Site Principal Investigator’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_