**INTRODUCTION**

Thank you for submitting an abstract for the 1st European Life After Stroke Forum.

For information and guidance on how to complete this form, please visit (<https://www.safestroke.eu/elasf/>).

The deadline for submitting abstracts is **27 November 2020.**

To submit your abstract please complete all the fields below. Please ensure that you complete all the mandatory fields (\*).

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**PRESENTATION TYPE**

|  |  |
| --- | --- |
| Presentation type  | Service |

**YOUR DETAILS**

|  |  |
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| Title | **Click to choose** |
| First name \* |  |
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**ABSTRACT DETAILS**

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| --- | --- |
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| Title \*(No more than 15 words) |  |
| List of author(s) and institutions(s) and email addresses \* |  |
| Presenting author (name and job title) \* |  |
| Funding body \* |  |
| Category \* | **Click to choose one****Please state below if other only:** |

Please structure your submission according to the heading to the side of each text box. The information below must not exceed 230 words. You may submit your information as bullet points. Do not include any tables or graphs.

|  |  |
| --- | --- |
| Summary of the service development \* |  |
| How this is relevant to other countries and what could be the potential impact across countries \* |  |
| How this will improve life after stroke for stroke survivors \* |  |

**SUBMITTING YOUR PROPOSAL**

Please tick the box here to confirm the following: [ ]

1. I confirm that I previewed this abstract and that all information is correct. I accept that the content of this abstract **cannot be modified or corrected after final submission**and I am aware that it will be published as submitted.
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I declare, that to the best of my knowledge, the only direct or indirect interest I have in both profit and not for profit making organisations potentially related to SAFE are those listed below:

At present or within the last 12 months I have been involved in the following activities (please feel free to add lines as appropriate)

|  |  |  |
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| Activity | Company | Product(s) or activity |
| Employee |  |  |
| Consultant\* |  |  |
| Principal investigator\*\* |  |  |
| Member of steering committee, advisory board or equivalent body |  |  |
| Investigator (not principal) for the development of a product\*\*\* |  |  |
| Speaker in industry sponsored symposia, press conferences or other meetings |  |  |
| I have received lecture fees and travel expenses (paid to my employer) for lectures at symposia |  |  |

|  |  |
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| I am a board member in the following national/international society(ies) other than SAFE |  |
| I have financial interest (stocks, shares, patents etc.) in the following profit making organisations potentially related to the SAFE |  |

\* Consultant: expert who charges a fee (personal, institutional or both) for providing advice or services or both

\*\* Principal investigator: investigator responsible for the coordination of investigators at different sites participating in the (multicenter) trial. This includes investigator initiated studies.

\*\*\* Investigator: physician involved in a clinical trial at a specific site. Can be the leader or the member of the clinical trial team. This includes investigator initiated studies.

Date: Place:

Name: Signature: