## **Data Access Application Form**

This application form is for requests for access to the research data of the Consortium. To obtain access, applicants must complete this entire application form.

# I - Contact and Research Project Information

A. Name, institution, and contact details of the applicant (Principal Applicant)
Please ensure that a full postal address and a valid institutional e-mail address are included. In case of more than one affiliation, applicants are asked to only provide their contact information pertaining to the institution they are affiliated with for the purpose of this research project.
Name:
Title:
Position:
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Alternate E-mail Address:
Mailing Address:
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B. Name, institution, and contact details of the authorized institutional representative  Please include a full postal address and a valid institutional e-mail address.
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#### C. Title of Research Project

Please include the title of the research project.

If available, please provide the address of the research project as well.

## D. Names of authorized personnel (within your institution)

Please provide the names of all investigators, collaborators, data managers and research staff that will have access to the research data in order to work on the research project. A valid institutional e-mail address for each name.

No personnel will require access to the research data.

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### E. Names of authorized students (within your institution)

Please provide the names of all students who will have access to the research data in order to work on the project. A valid e-mail address for each name is required. Students at other institutions should not be included in this list.

No students will require access to the research data

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II - Signature
I have completed all mandatory fields, included all necessary documents, and hereby submit this application.
Signature