**Thank you for your interest in INSTRuCT data.**

Please send your completed proposal and any questions to Suzi Birz [suzi@uchicago.edu](mailto:suzi@uchicago.edu)

|  |  |
| --- | --- |
| Date |  |
| Proposal Title |  |
| Principal Investigator |  |
| Institution |  |
| Cooperative Group | * COG * CWS * EpSSG * Not a member of one of these Cooperative Groups |
| E-mail Address |  |
| Co-authors |  |
| Statistician name |  |
| Statistician e-mail |  |
| Statistician institution |  |
| Statistician Affiliation | * COG * CWS * EpSSG * Not a member of one of these Cooperative Groups - CV attached * If you would like to perform the analysis locally, in lieu of using a statistician or data manager from COG, CWS, or EpSSG, please include the CV of your statistician and provide a detailed statistical plan. |
| Project Timeline | All investigators requesting data should ensure that the project is completed within a reasonable timeframe. Every effort should be made to meet the time points outlined below: |
| If you foresee challenges in adhering to this timeline, please describe |  |

|  |  |
| --- | --- |
| Data Portal Pilot | Did you utilize the PCDC Data Portal Cohort Explorer Tool to determine study feasibility or sample size for this project?   * Yes * No |
| Did you utilize the PCDC Data Portal Kaplan-Meier Survival Analysis Tool for early hypothesis exploration for this project?   * Yes * No |
| If you utilized the Kaplan-Meier Survival Analysis Tool, have you attached the relevant entries from your personal hypothesis record along with the project request?   * Yes  - attached * No - not applicable |

**Please format your project proposal as follows:**

Please limit your request to 5 pages

1. Specific Aims
2. Hypothesis
3. Patient Cohort (Eligibility Criteria)
4. Background
5. Significance
6. Proposal description
7. Data Requested [please refer to the data dictionary to define the specific data elements requested.]