**Additional request for Data Access**

Please note: To request further data following approval of the original Data Access Application (DAA), an **additional request for data** form will need to be submitted. If the data request is deemed minor, appropriate, and relevant to the original application, consideration for approval will be given by the Data Access Committee Chair(s). For major updates, the application will need to be submitted to the Data Access Committee and, for industry applicants, to the National Steering Committee.

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| **DAA Application Title and DAA number** |

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| **SECTION 1: LEAD APPLICANT** |
| **1. Lead Applicant** |
| Name: |  |
| Job title: *Please list job title relevant to application* |  |
| Organisational email:*Do not use personal email address* |  |

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| **For and on behalf of Applicants:** **Applicant confirms that the contents of the application is correct and acknowledge the contents of the Data Access Agreement and agree to comply with the obligations therein.**  |
| **Print Name:** |  |

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| **Signature:** |

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| **SECTION 2: THE STUDY** |
| **1. Plain, simple language summary of study updates and impact**As part of the BioResource’s ongoing engagement with our volunteers we are looking to provide our volunteers with an update on the research outcomes and any impact that the research we support has had. Engaging with our volunteers helps the BioResource maintain volunteer interest and in the long run enables studies such as yours to be possible. Please provide us with a short paragraph detailing any findings and impact from your study in plain language so we can share with our volunteers. |
| **2. Justification for current request**Please outline the reason for the additional request and provide information on how the new data requested will contribute to your study |
| **3. Comments** Please let us know if there is anything we should be aware of |

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| **SECTION 3: DATA**  |
| **1. Please describe the data you are requesting.**  |
| **2.** **Please let us know if this data is required for all participants or just a subset.**  |

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| **SECTION 4: ORIGINAL DAA (to be filled by BioResource)** |
| 1. **Study group(s)/disease cohorts of original DAA and summary of data provided**
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| 1. **Number of participants of original DAA cohort please include details of control and patient groups**
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| 1. **Requested data types and data specifications**
* Clinical Data: [ ]  Case Report Forms; [ ]  NHS Trust Data

[ ]  Demographic Data[ ]  Genotype Array Data[ ]  EGA (European Genome-Phenome Archive) data: please specify dataset ID(s):* Haplotype Data: [ ]  ApoE; [ ]  HLA; [ ]  Blood groups
* Sequencing Data: [ ]  WES; [ ]  WGS; [ ]  RNA-Seq
* Self-Reported Data: [ ]  Health & Lifestyle Questionnaire Data

[ ]  Metabolomic Data [ ]  Other Data (please specify) Click or tap here to enter text. |
| 1. **Data Access method**

[ ]  download[ ]  copy bespoke data[ ]  view and analyse data at the University of Cambridge’s High-Performance Computing (HPC) service[ ]  Secure Data Environment (SDE) |