



SAMPLE AND DATA ACCESS FORM FOR GARBH-INI COHORT

GARBH-Ini data and sample access application form		
1.	Organization (Name and Address)	<hr/> <hr/> <hr/>
2.	Category of Organization	Please (✓) a) Academia <input type="checkbox"/> b) Industry <input type="checkbox"/>
3.	Type of Study Objective	• Non GARBH-Ini PI initiated objective/s ✓
4.	Title of the Research Project	
5.	Area of Research	
6.	Name of Principal Investigator	
7.	Name of Co-investigators	
8.	Name of the Collaborators	
9.	Multi-centric study	Yes <input type="checkbox"/> No <input type="checkbox"/>
10.	Objectives of the study	
11.	Downstream Assays	
12.	Selection Criteria	Inclusion Criteria Exclusion Criteria
13.	Sample size	a. Control: b. Cases:
14.	Sample types /Visit number	

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15.	Sample volume/ quantity	
16.	Clinical data required	Yes <input type="checkbox"/> No <input type="checkbox"/>
17.	Imaging data required	Yes <input type="checkbox"/> No <input type="checkbox"/>
18.	Study period	
19.	Funding	Applied <input type="checkbox"/> Approved <input type="checkbox"/> Yet to be applied <input type="checkbox"/>
20.	Funding details	
21.	Funding agency	
22.	Total Budget	
23.	Ethical approval (If approved attach copy of the approval letters from the respective IRBs)	Approved <input type="checkbox"/> Applied for <input type="checkbox"/> Not applied <input type="checkbox"/>
24.	Approval from Biosafety committee (If approved attach copy of the approvals from the respective IBSC)	Approved <input type="checkbox"/> Applied for <input type="checkbox"/> Not applied <input type="checkbox"/>
25.	Detailed study protocol: Brief description of the proposal highlighting the Background, Rationale, Hypothesis, Study Design and Outcome.	Please provide a brief description (two pages).

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26.	<p>Undertaking for proper use of biospecimen/data and for giving due credit in publications and resultant products (Please sign to confirm all the below mentioned undertakings)</p> <p>I/we undertake that:</p> <ol style="list-style-type: none"> a. Biospecimen/data requested will be used exclusively for purposes of the approved project detailed in the application submitted to the Biorepository. b. Due credit/authorship/acknowledgement shall be given to the study investigators. Funders should be given appropriate credits. c. The bioresource shared are for national use only. d. All data generated from this project will be returned as part of the “open research” platform sharing. I/we approve THSTI to list us in their database/presentation/reports/website as one of the organizations who had access to the Bioresources. <p>Data generated (raw and processed data) should be shared with GARBH study coordinator post publication.</p> <p>Place: _____ Name of Principal Investigator: _____</p> <p>Date: _____ Signature of the Principal Investigator: _____</p>
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List of attachments:

1. Proposal as submitted to the funding body that has been approved/ Fully filled format for LOI submission to THSTI Bio-repository.
2. CV of the investigators.
3. Scanned copies of the Ethics and Biosafety Approvals.



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For use of the Biorepository only:	
REQUEST FORM ID:	
Additional information to be completed before consideration by the Internal Governance Mechanism	
A. Availability of requested biospecimen and its associated data	
B. Volume of sample remaining if request application is approved	
C. Any other comments:	
(Faculty in charge Biorepository Member Secretary)	
Name:	
Date:	

Format for LOI submission for access to data and/ or samples from Garbhini cohort

(Not more than 2-pages excluding Curriculum Vitae)

i) Title:

ii) Scientific Hypothesis

iii) Key/Research questions (100 words):

iv) Rationale:

v) Primary Objectives:

vi) Methodology:

vii) References:

viii) Curriculum Vitae