**IDDO Data Access Application Form**

Please review the Data Access Guidelines and the Data Transfer Agreement***[[1]](#footnote-1)*** before completing this form. Compliance with both will be required before access to data will be granted.

**Please complete all sections of this form *fully* and return this form plus a brief *academic CV or webpage URL* and the *study selection (xls) file* (see below for instructions) to** **dataaccess@iddo.org**

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| **SECTION A: RESEARCHER / RESEARCH TEAM INFORMATION** |
| **Lead Requestor Details** |
| **Title (*delete as applicable*)**  | **Professor / Dr** |
| **First name (given name)** |  |
| **Surname (family name)** |  |
| **Gender (*delete as applicable*)** | **Female / Male / Other**  |
| **Position at employing organisation/ institution** |  |
| **ORCID ID** [**https://orcid.org/**](https://orcid.org/) |  |
| **Email** |  |
| **Telephone/Skype** |  |
| **Employing Organisation/Institution** *Institution with a remit including health, research or academic pursuit, and with legal status which includes the scope to sign the* ***Data Transfer Agreement***1 |
| **Institution Name** |  |
| **Address** |  |
| **Department (if applicable)** |  |
| **Please acknowledge that you have read the Data Transfer Agreement** | YES/NO(delete as appropriate) |
| **Co-applicants (ALL individuals accessing data will need to be listed on this form. If this changes we will need to be notified)***Add rows as necessary* |
| **Name**  |  |
| **Title** |  |
| **Organisation/Institution** |  |
| **Name** |  |
| **Title** |  |
| **Organisation/Institution** |  |
| **Name** |  |
| **Title** |  |
| **Organisation/Institution** |  |
| **Conflicts of interest***List details of any conflicts of interest (financial or non-financial) that exist relating to the use of the requested data by the data requestor and/or co-applicants (see e.g. ICJME* [*http://icmje.org/recommendations/browse/roles-and-responsibilities/author-responsibilities--conflicts-of-interest.html*](http://icmje.org/recommendations/browse/roles-and-responsibilities/author-responsibilities--conflicts-of-interest.html) *)* |
|  |
| **SECTION B: RESEARCH PLAN** *Please complete* ***all*** *questions in this section. The information provided in this section will be used to assess the data request application* |
| **Title of Proposed Research** |  |
| **Is this a re-submission of a previous application that has been reviewed by the IDDO DAC. If so please give reference number** |  |
| **Summary of Research in Lay Language (suggested ~ 100 words)** |
|  |
| **Scientific Summary of Research (maximum 300 words)** |
|  |
| **Summary of Research Objectives (maximum 200 words)** |
|  |
| **Outcome Measures (maximum 200 words)***Provide details of* ***primary and secondary*** *outcome measures* |
|  |
| **Proposed methodology and statistical analysis plan (maximum 400 words)** |
|  |
| **Ethics (maximum 300 words)***Provide details of any ethical considerations relating to the research proposal. Is Ethics Committee or Institutional Review Board approval required by your institution to undertake this research? Have you applied or been granted ethical approval to undertake this research? If no Ethics Committee or IRB approval is required, please explain why.* |
|  |
| **Publication and Dissemination Plan (maximum 300 words)***Provide details of timelines for publication and dissemination of research findings. Provide details of plans for authorship/acknowledgement of data contributors.* |
|  |
| **Addressing Knowledge Gaps (maximum 300 words)***Provide details of how this research will address knowledge gaps of importance to those affected by or at risk of emerging and poverty-related diseases.* |
|  |
| **Equity and Capacity Building (maximum 300 words)***Provide details of how this research will support equity of treatment and/or capacity building in endemic regions affected by or at risk of emerging and poverty-related diseases.*  |
|  |
| **Funding (maximum 200 words)***Provide details of how this research will be funded/resourced.*  |
|  |
| **Scientific Review (maximum 200 words)**Provide details of how, if any, this application has been scientifically reviewed. This could be by your institution, a funder/donor or ethics committee. |
|  |
| **SECTION C: DATA** |
| **Main Variables***Provide a list of the* ***main variables*** *required to achieve the research objectives* |
|  |
| **Studies Required*****Please include details of all of the requested studies in this section, but highlight clearly DAC controlled studies:****Access the IDDO disease theme data inventories and search for datasets using PubMed ID numbers. You can download a list of datasets via the Download Selection button at the bottom left of the inventory. Please save the file with the name format* ***[name-date-data request.xls]*** *and submit the file (for internal use only) with this form.* |
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1. The ***Data Transfer Agreement*** *is a contract between the University of Oxford (on behalf of IDDO) and the recipient institution that governs the legal obligations and restrictions, as well as compliance with applicable laws and regulations, related to the****transfer****of such****data****between the parties. The named Institution will be required to sign the data transfer agreement before the release of any data by IDDO.* [↑](#footnote-ref-1)