

CCNA Biological Sample Access Request Form

Administrative information

Applicant information

Project Leader's Information			
Name:		Affiliation/Organization:	
Address:		City:	Province:
Email address:	Phone Number:	Application Date (dd/mm/yyyy):	

Project Information

Project title:	
Short title (5 words or less):	
References relevant to proposed project:	
1	
2	
3	
4	
5	

CCNA information (if applicable):
CCNA Team/Platform/Cross-cutting program name/number:
Team/Platform/Cross-cutting program leader name:

Collaborator information

List all collaborators with this proposal		
Main collaborator:	Name:	Affiliation:
	Email address:	
Other collaborator:	Name:	Affiliation:
	Email address:	
Other collaborator:	Name:	Affiliation:
	Email address:	

Proposed timeline

Date of project initiation (dd/mm/yyyy):	Date of project completion (dd/mm/yyyy):
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Purpose of request

	New study
	Existing study

Type of biological sample requested (Please refer to inventory for availability – all aliquots are between 250-500µL)

Blood		
Serum	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):
Plasma	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):
Buffy coat	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):
Saliva	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):
Urine	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):
Cerebrospinal fluid	Number of aliquots per participant sample:	Diagnostic cohorts of interest (as per inventory):

Do you have funding for the proposed study?

Yes – please state all funding sources	
Start date (dd/mm/yyyy):	End date (dd/mm/yyyy):
Grant title:	
Name of funding agency/source:	
No	
Other (e.g., grant application):	

Research proposal

Please provide a description of the proposed research for which you are requesting biospecimens from CCNA
 (Proposal should not exceed three pages, excluding tables, figures, and references)

Background – including specific hypotheses:

Methods

a) Inclusion/exclusion criteria

b) Data analysis

Specific aims

Preliminary data

Deliverables, timeline, and future studies

I, the undersigned, certify that, in the performance of the project for which access to CCNA biological samples is hereby requested:

- 1- (if Canadian researchers):** I will adhere to the requirements of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* and will ensure that a human ethics certificate has been obtained from the appropriate Research Ethics Board and any other required certificates as applicable (e.g., biohazards in accordance with The Laboratory Biosafety Guidelines of the Medical Research Council of Canada (2004), and animal ethics in accordance with the guidelines of the Canadian Council on Animal Care).
- 2- (if non-Canadian researchers):** I will ensure that a human ethics certificate has been obtained from the appropriate Research Ethics Board and any other required regulatory certificates as applicable (e.g., biohazards, animal care, etc.) in my country.
- 3-** I will comply with all applicable laws, regulations and guidelines regarding protection of personal information, including provincial legislation concerning privacy and personal health information.
- 4- I have read, understood, and signed the CCNA Publications and Data Access Committee Policy.**
- 5- I have read, understood, and signed the CCNA Biological Samples Access Committee Policy.**

Signature

Name (block letters)

Date (dd/mm/yyyy)

**To be completed by the
CCNA Biological Samples Access Committee**

Project number:

Date of committee review:

1. Committee decision

- Approved
- Conditionally approved – state reason

- Hold for future consideration – state reason

- Not approved

2. Is the lead investigator:

- Internal
 - CCNA Team, Platform, or Cross-Cutting Program Principal Investigator
 - CCNA Project Leader
- External – Canada
- External – International

3. Additional information

Date samples sent:

Type of samples sent:

Quantity of samples sent: