

EXAMPLE TEMPLATE – FOR INFORMATIONAL PURPOSES ONLY

This form is an EXAMPLE only and should not be filled out and sent to NIDDK Central Repository. If you are interested in requesting data stored at NIDDK Central Repository, please navigate to the 'Requests' tab from NIDDK-CR Homepage and select "Data Request".

NIDDK Central Repository – Resources for Research (R4R)

Data Request Form

* = Required Field

General

Request Name*

Study*

Research Team Information

Requestor/Principal Investigator Information

Name (*auto-populated*)

Institution Name (*auto-populated*)

Email Address (*auto-populated*)

Institution Location (*auto-populated*)

Phone (*auto-populated*)

Other Researchers Under the PI

Provide the information of other researchers in the same institution as the PI that will have access to the data (or its derivatives).

Role in Team	Email Address	Name	Job Title/Position

Authorized Organization Representative Information

Please provide the name, title, and email address of the official from your institution who will act as the Authorized Signatory on the Agreement. The Authorized Signatory (aka Signing Official) is described on the [Frequently Asked Questions](#) page as follows:

The Authorized Organization Representative (AOR) as defined by NIH is the individual, named by the applicant organization, who is authorized to act for the applicant and to assume the obligations imposed by the Federal laws, regulations, requirements, and conditions that apply to grant applications or grant awards. The AOR is also referred to as the authorized signatory or Signing Official (SO). Please see the NIH Grants Glossary page for additional details. The authorized person fulfilling this role may have any number of titles in your organization (e.g., a Manager, Officer, Director, Vice President, or Chief of contracts, grants, licensing, research administration, or sponsored programs for the institution). To strengthen data security measures, data management, and to allow for independent oversight, NIH will not allow individuals to occupy multiple key roles; that is, a PI may not serve as the AOR. Note: If registered with eRA Commons (not required), requestors must use the same authorized person (e.g., Grants Management Specialist) as listed in eRA Commons.

Email Address*

Name*

Job Title/Position*

Independent Collaborators

Provide the information of collaborators in a different institution than the PI that will have access to the data (or its derivatives); a secondary agreement is required for Independent Collaborators and their institutions.

Institution 1

Institution name*

Institution type*

Country*

Province/region/state

Website URL*

Domain

Collaborators from Institution 1

Role in Team	Email Address	Name	Job Title/Position

Authorized Organization Representative Information for Institution 1

Email Address*

Name*

Job Title/Position*

If your project includes more than one collaborating institution, please add the similar information for other institution(s) on a separate sheet of paper

Research Project Information

Title of Research Plan*

Description of Research*

The Research Description must convey the relevant background to justify the request. This should include the following:

Scientific premise, including the importance of the research question and the potential impact of the project	
Explanation on how the data being requested will accomplish the aims of the proposed research project	

Research Objectives and Design*

Please provide a description of your Research Objectives and Design. The description should include following:

Hypothesis that will be tested	
Research methodology	
Analysis procedures	
Justification for the use of the specific data for your research project	

Analysis Plan*

The Analysis Plan must describe a detailed plan for data analysis. This should include:

A brief summary of the team's expertise and experience to perform the analysis proposed	
Specifics on how the data will be held, managed, and processed	
Specifics on how data generated will be managed and shared per NIH's Data Management and Sharing Policy and deposited back to NIDDK Central Repository at the discretion of NIDDK per the Data and Resources Use Agreement	

Research Use Statement*

The Research Use Statement should be a standalone summary (1 or 2 paragraphs) of the proposed Research Project in plain language and include any proposed use of cloud computing, private cloud computing, or remote access on the project. The Research Use Statement will be made publicly available in accordance with relevant HHS, NIH policies, and NIDDK-CR policies, and featured in the List of Approved Requestors on NIDDK-CR Resources for Research (R4R) website.

Research Use Statement	
-------------------------------	--

Research Type *

Please select all categories that describe your research project.

Support Information

Support Type

Other

Grant Number, if NIDDK funded

If more than one Support type, please list on a separate sheet of paper

Policy Compliance and Documentation

Data Security

By checking this box, I, as the PI or PI representative requesting access to NIDDK-CR Data and/or Resources, attest that Data will be secured, at a minimum, in accordance with [NIST SP 800-171](#) or the equivalent ISO/IEC [27001/27002](#) standards as stipulated by the [NIH Security Best Practices for Users of Controlled-Access Data](#)*

Please select the information security practices that will be used*

Institute supported, controlled access server

Institute supported, password protected desktop computer

Encrypted, password protected laptop computer

Encrypted portable media (encrypted external hard drive, encrypted thumb drive)

Cloud computing/private cloud computing

Other

If other, please specify

Additional details about information security practices that will be used*

You may view the [Best Practices for Computer Security and Data Control](#) document for information on best practices.

Do you plan to combine the requested data with other data sources?*

Yes

No

If yes, please describe the other data sources you plan to combine and how you plan to combine them, specifically highlighting how you plan to prevent re-identification*

Attachments

IRB Approval*

Resources available through NIDDK Central Repository are controlled access. For access to these resources, you must provide your institution's IRB approval, exemption, or Not Human Subjects Research determination letter. If you do not have an IRB, you must use an external IRB. This is required whether you publish your findings or not. For more information on IRB, visit the [Frequently Asked Questions](#) page.

Other Documents