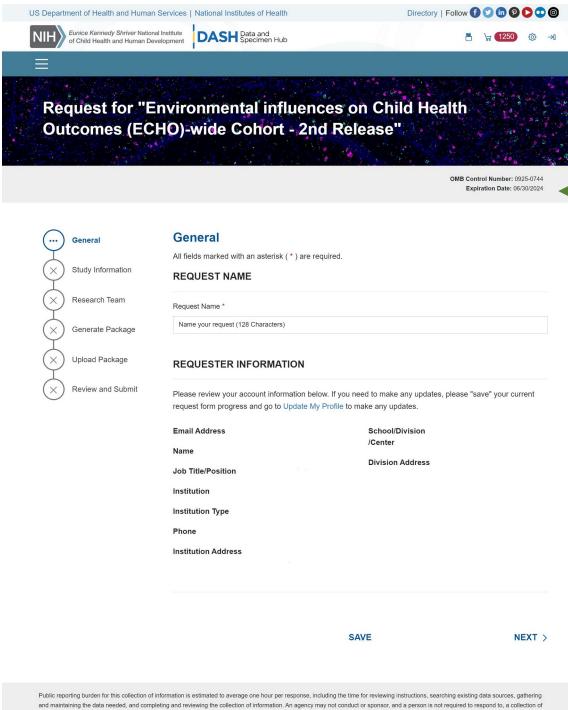
Attachment A.2-4 - Data Request (Approved OMB Number: 0925-0744)



Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0744). Do not return the completed form to this address.





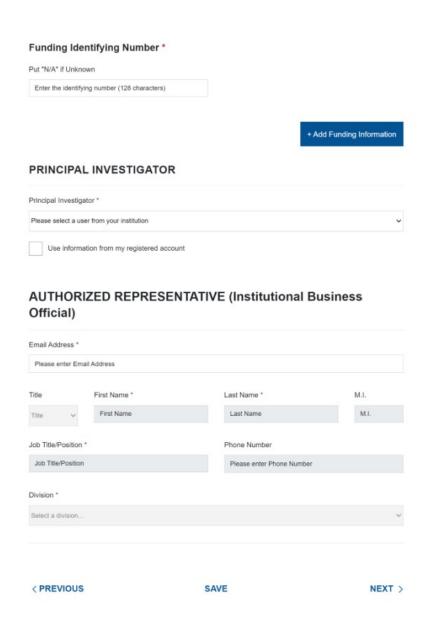
National Institutes of Health

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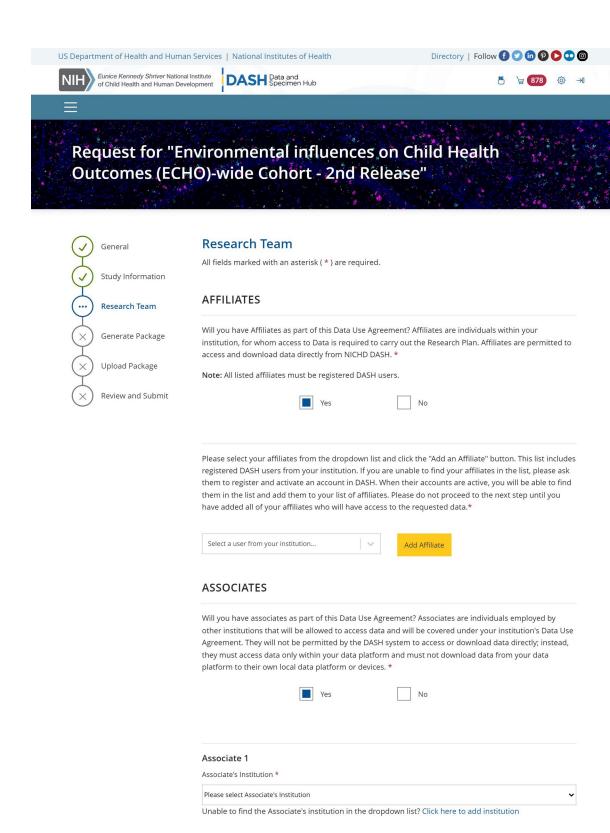
Outcomes (ECHO)-wide Cohort - 2nd Release" Study Information General All fields marked with an asterisk (*) are required. Study Information Please fill out the fields below describing the study you are requesting data for. Research Team Request Project Title * Generate Package Please enter a request project title that is less than 128 characters including spaces. Upload Package Research Plan * Review and Submit Please enter a research plan that is less than 1024 characters including spaces. Please provide a brief description of the study to include study aims/goals, hypothesis that will be tested, methodology to be used, and the expected Please enter your research plan (1024 Characters). Design and Analysis Plan * Please enter a design and analysis plan that is less than 1024 characters including spaces. In the description please include specific aims, a short abstract of the design and analysis plan. Please enter your design and analysis plan (1024 characters). **FUNDING INFORMATION** Funding Source * NIH Extramural NIH Intramural Select one or more institutions. Hold Ctrl key for selecting multiple institutions * Center for Information Technology (CIT) Center for Scientific Review (CSR) Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) Fogarty International Center (FIC) National Cancer Institute (NCI) National Center for Advancing Translational Sciences (NCATS) Funding Type * Grant

Contract

Other







Title

Title

First Name *

First Name

Last Name *

Last Name

M.I.

	ociate's Job Title/Position		
Project Role *			
Please enter Asso	ociate's Project Role		
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Request for "Environmental influences on Child Health Outcomes (ECHO)-wide Cohort - 2nd Release"



General

Study Information



Research Team



Generate Package



Upload Package



Review and Submit

Generate Package

All of the documentation required for your data request will be automatically generated when you click on "Confirm and Generate Package." Please review your entries and make any necessary changes before you click on "Confirm and Generate Package."

You will receive the Data Request Package by email - please review all documents before you obtain the necessary signatures. The Requester is responsible for coordinating with all parties involved to collect the required signatures to complete the data request.

If you need to edit your data request after your Data Request Package has been generated, you must make these changes in the DASH System; you must not edit the content of the system generated Data Request Form or Data Use Agreement documents provided to you via email. If you need to edit any fields after receiving the Data Request Package, you must log back into the system, go to "My Cart," click on the "Edit Request" button of the particular request, make your edits, and then re-generate your request package again.

The following documents will be included in the package:

- · Data Request Form
- · Data Use Agreement

The Data Request Form and Data Use Agreement can be provided in a format that is easier for individuals with disabilities to access (508 Compliant). If you or your team need these documents to be made 508 Compliant for you to complete your data request, please email SupportDASH@mail.nih.gov.

< PREVIOUS

Confirm and Generate Package

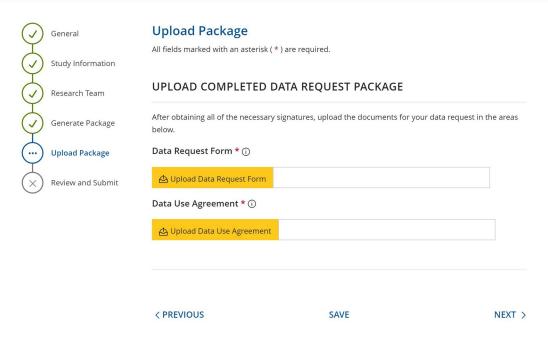
NEXT >





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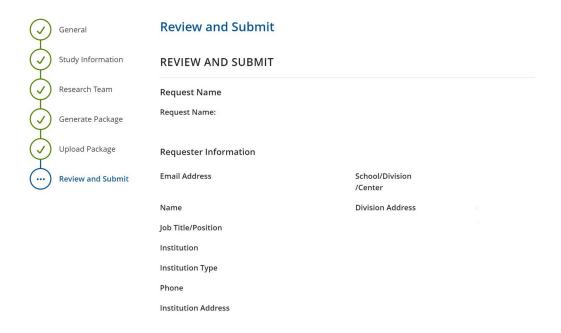




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Request for "Environmental influences on Child Health Outcomes (ECHO)-wide Cohort - 2nd Release"



Study Information

Project Title

Project Description

Design and Analysis

Plan

Funding Information

Funding Source: Funding Institution(s):

Funding Type: Grant Number:

Principal Investigator

Principal Investigator

Authorized Representative

Email Address /Center

Name

Job Title/Position

Institution

Institution Type

Phone

Institution Address

School/Division

Division Address

DATA REQUEST SUBMISSION

Your data request will be reviewed by the NICHD DASH Data Access Committee and/or the Study Steering Committee/PI as necessary. You will be notified via email about any updates to your request. You may also review your data request status at any time from "My Cart."

< PREVIOUS **SUBMIT**







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