



NICHD DATA AND SPECIMEN HUB (DASH)

Biospecimen Request Submission Form

OMB Control Number: 0925-0744 Expiration Date: 07/31/2027

INSTRUCTIONS:

Fill out the following fields to the best of your ability. Hovering over each field will display a tool tip with additional detail. For questions or clarification, contact <u>SupportDASH@mail.nih.gov</u>. Send the completed form to SupportDASH. Following review, the Request Package supporting documentation – the Biospecimen Request Form (BRF) and Material Transfer Agreement (MTA) – will be generated and sent to the Requester. Review all documents before you obtain the necessary signatures. The Requester is responsible for coordinating with all involved parties to collect the signatures required to complete the request.

If you need to edit your request details after the Request Package has been generated, make these changes in this form and resubmit it to SupportDASH. An updated Request Package will be generated. Do not edit the content of the BRF or MTA, as all details must match between forms.

Note that if your funding is not yet available, you may reach out to SupportDASH to request a Letter of Availability so you may apply for funding.

Additional guidance can be found on the <u>DASH Tutorial</u> and <u>Request Resources</u> pages.

All fields marked with an asterisk (*) are required.

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.

1. General

REQUESTED STUDY

REQUEST NAME

Request Name * (128 Characters)

→ REQUESTER INFORMATION

If you have an existing account in DASH, please enter your account information below. If you need to make any updates to your DASH account, please go to Update My Profile.

Name *

Email Address *

Job Title/Position *

Institution *

Institution Type *

Institution Address *

School/Division/Center

2. Study Information

Please fill out the fields below describing the study you are requesting biospecimens for.

REQUEST PROJECT TITLE *

Please enter a request project title that is less than 128 characters including spaces.

RESEARCH PLAN *

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 outcomes. All acronyms must be spelled out at least once.

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. All acronyms must be spelled out at least once.

FUNDING INFORMATION

Funding Status *

I have funding to pay for biospecimen shipping, handling, and analysis

Funding Source *

 NIH Extramural
 NIH Intramural
 Other

 Funding Institution(s) *
 *

 Enter the full name(s) of the funding institution(s) :
 *

Funding Type *

Contract

Grant

Other

I am applying for funding for this

biospecimen request

Funding Identifying Number *

Put "N/A" if unknown. If "Other", please specify.

PRINCIPAL INVESTIGATOR (PI)

Identify a PI from the requesting institution. The PI may not be a student/fellow.

Name *

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Email Address *

Job Title/Position *

Institution *

Institution Type *

Institution Address *

School/Division/Center

AUTHORIZED ORGANIZATIONAL REPRESENTATIVE (AOR)

Identify an AOR from the requesting institution. The AOR must have the authority to sign and enter into agreements on behalf of the institution. Additional details can be found in the <u>DASH Guide for Authorized</u> <u>Organizational Representative (AOR)/Signing Official</u>.

Name *

Email Address *

Job Title/Position *

Institution *

Division

Selected Biospecimens

Biospecimen Availability Disclaimer

The biospecimen catalog provided in DASH is based on biospecimen availability at the time of request. NICHD DASH cannot guarantee the type, quality, or amount of biospecimens available in the NICHD Contracted Biorepository. Biospecimens will be available on a first come first served basis. Biospecimens will be shipped to the Requester based on terms and requirements stated in the NICHD DASH Policy. All biospecimen related transactions must be made directly with the NICHD Contracted Biorepository.

BIOSPECIMENS BEING REQUESTED *

Enter the quantity and volume/amount for each specimen type being requested. The final sample list may be selected from the master inventory via communication with SupportDASH.

Specimen Type	Quantity Needed	Amount Needed (per sample)

Price Disclaimer

Prices to obtain biospecimens through DASH will vary dependent on costs for processing, aliquoting, shipping and handling. Exact price will be finalized by the NICHD Contracted Biorepository after your biospecimen request has been approved by the DASH Biospecimen Access Committee. Once approved, all transactions for fulfilling your request will be made directly by the NICHD Contracted Biorepository.