Research Request

Instructions: Please fill out all the required questions to complete your research request. You will need a completed Codebook and valid CITI training certificates that will be uploaded at the end of this application.

PLEASE NOTE:

All requests are submitted to the PSC for approval FIRST.

Research requests will not be sent to the Data Center until PSC approval is attained. The whole process may take approximately 8 weeks to complete (allow 2 weeks for PSC approval and 6 weeks for a data request to be generated). You will be notified of PSC decision when received.

Research requests must be made by first author/lead investigator. We do not accept coauthors or students/employees to submit requests on behalf of the first author/lead investigator.

* Indicates required question

1. Email *

Investigator's Information

Please fill in the information below about you.

- 2. Investigator's Name *
- 3. Investigator's Professional Title *

- 4. Investigator's Professional Institution *
- 5. Investigator's Mailing Address *

- 6. Investigator's Email Address *
- 7. Investigator's Phone Number *
- 8. Co-Investigator's Name *

9. Co-Investigator's Email Address	9.	Co-Investigator's Email Add	dress	*
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New	Research	Request o	r Research	Request	Modification

10. Would you like to start a new research request or modify an existing request? *

Mark only one oval.

New research request Skip to question 30

Modify an existing request Skip to question 11

Study Details

- 11. What is the title of your existing study that you would like to modify? *
- 12. What year did you submit this Data or Research Request? *
- 13. Do you want to modify your study's details (CHANGES TO ANY OR ALL OF: * study title, hypothesis, experimental approach, statistical analysis, time frame, etc.)?

Mark only one oval.

Yes Skip to question 14

No Skip to question 19

Study Details Modification

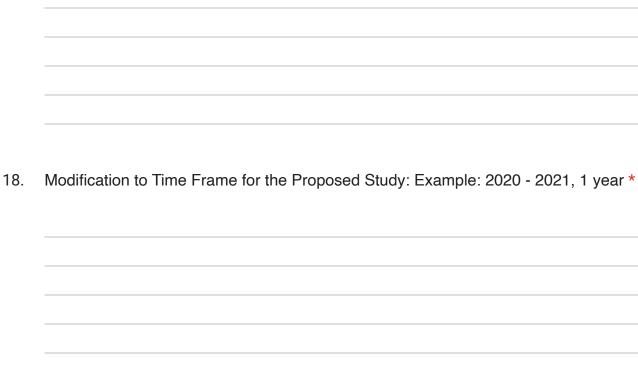
Write N/A if not modifying

14. Modification to Title of Study *

15. Modification to Summary of Study (One short paragraph) *

16. Modification to Hypothesis: Clearly state the hypotheses to be tested *

17. Modification to Experimental Approach: Indicate the study population, sample * size, design, and data and analytical methods (please be very detailed)



Intent to Publish

19. Do you want to modify your intent to publish details (CHANGES TO ANY OR ALL * OF: intent to publish, intended output, co-authors, etc.)?

Mark only one oval.

____ Yes



No Skip to question 23

Intent to Publish Modification

Write N/A if not modifying

20. Modification to your intent to publish *

Mark only one oval.

I intend to publish

I do not intend to publish

I am not modifying my intent to publish

21. Modification to your intended output *

Check all that apply.

Abstract Peer Reviewed Journal Option 3

- Other:
- 22. Modification to the list of co-authors and possible CHL co-authors *

Request Details

23. Do you want to modify your request details (CHANGES TO ANY OR ALL OF: * request purpose, names of individuals who will access the data, preferred dataset format)?

Mark only one oval.

____ Yes

No Skip to question 28

Request Details Modification

Write N/A if not modifying

24. Modification to what you are requesting for (select all that apply) *

Check all that apply.

Data
Support - analytical
Not modifying what I am requesting for
Other:

25. Modification to the purpose of your request (select all that apply) *

Check all that apply.

Report
Manuscript
Abscract
Instruction/Educational
Class Paper
Presentation
Thesis/Dissertation
Grant Proposal
Not modifying the purpose of my request
Other:

26. Modification to the names of individuals (and their professional institutions) who * will access the datasets

27. Modification to the preferred format of the dataset *

Check all that apply.

EXCEL

SAS

Codebook

28. Do you want to modify the variables you selected? *

Mark only one oval.

) Yes

No Skip to question 62

Codebook Modification

Download the Codebook: <u>https://www.chl-pacific.org/wp-content/uploads/2023/06/CHL-</u> Codebook_20230602.xlsx

29. Upload Modified Codebook *

Files submitted:

Skip to question 62

Student Status

30. Are you a student? *

Mark only one oval.

____ Yes

No

Skip to question 35

Secondary Email Address

Should you choose to opt out of keeping your student email address after graduation, we will contact you by the email address you provide below.

31. Secondary/alternate email address (other than school address) *

Mentor Approval

Students must have a CHL-affiliated mentor in order to make a data request. Data request applications must be approved by the mentor prior to request submission. We will contact your mentor for approval confirmation.

32. Mentor's Name *

33. Mentor's Email address *

34. Did your CHL mentor approve your application prior to submission? *

Mark only one oval.

Yes No Other:

Funding Source

Provide your project's funding source (if any)

35. Do you have funding available for this study? *

Mark only one oval.

🔵 Yes

No (self funded) Skip to question 45

Funding Source

Provide your project's funding source

36. Program or Grant Affiliation *

Mark only one oval.

____ K01

🔵 USDA

Predoctoral Fellowship

Postdoctoral Fellowship

Other:

37. Agency/Institute

38. Grant Number

39. Award Amount

41. Primary Performance Site (University/Institute & City/State/Country)

42. Principal Investigator Name & Title

43. Do you have a UH account no.? *

Mark only one oval.

🔵 Yes

()

No Skip to question 45

UH Account No.

44. Enter your UH account number *

Study Details

45. Title of Study *

).	Summary of Study (One short paragraph) *
,	Hypothesis: Clearly state the hypotheses to be tested *
	Experimental Approach: Indicate the study population, sample size, design, and data and analytical methods (please be very detailed)
	Statistical Analysis: Identify the institution where the analysis will be done, the biostatistician who will assist with the analysis, and the statistical methods that wi be used.

aragraph) * 16 $\langle \cap$ h <u>د م</u>

50. Time Frame for the Proposed Study: Example: 2020 - 2021, 1 year *

Intent to Publish

51. Are you intending to publish? *

Mark only one oval.

- Yes Skip to question 52
- No Skip to question 54

Other:

Intent to Publish Part II

52. Select the intended output *

Check all that apply.

Abstract

Peer Reviewed Journal

Other:

53. List co-authors and possible CHL co-authors. *

Request Details

Please answer the following questions pertaining to your request.

54. Purpose for Request *

Check all that apply.

Report
Manuscript
Abstract
Instruction/Educational
Class Paper
Presentation
Thesis/Dissertation
Grant Proposal
Other:

55. Are you requesting data? *

Mark only one oval.

\square	\supset	Yes

Skip to question 56

No Skip to question 61

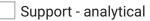
Data Request Details

Please answer the following questions pertaining to your data request.

56. Requesting for (select all that apply) *

Check all that apply.

CHL	Data



Other:

57. Names of other individuals who will access the data set and their professional * institutions

58.	What is your preferred format of the data set? *
	Mark only one oval.
	SAS
	CSV
	Other:

Upload Codebook

Please upload your completed Codebook.

PLEASE NOTE - The Codebook MUST be filled out and attached in order for data request to be completed and forwarded to PSC.

The CHL Codebook can be downloaded from the sidebar of the Data Request site. Download the CHL Codebook: <u>https://www.chl-pacific.org/wp-content/uploads/2023/06/CHL-Codebook_20230602.xlsx</u>

59. Upload Codebook *

Files submitted:

60. Upload Secondary File

Files submitted:

Upload CITI Training Certificates

Please upload your valid CITI training certificates. Include certificates for those that will have access to the data.

61. Upload All Applicable CITI Certificates as a single PDF (one per page) *

Files submitted:

Acknowledgment

CHL Data Use Protocols and Guidelines can be viewed from the sidebar of the Data Request site.

Direct link to the CHL Data Use Protocols and Guidelines: <u>https://www.chl-pacific.org/wp-content/uploads/2021/04/CHL-Data-Protocol-and-Guidelines_04012021.pdf</u>

62. By typing my name below I certify that I have read and understand the CHL Data * Use Protocol and Guidelines and agree with the terms specified in them. I certify that all information and materials submitted with this request are truthful. I understand that upon approval of a requested dataset, a total fee of \$1,000 will be required (\$500 due after PSC approval and \$500 due before receiving the dataset(s)) unless special circumstances apply.

Request for Fee Waiver

This section is for investigators who would like to request for a fee waiver due to special circumstances.

63. Would you like to request a fee waiver? *

Mark only one oval.

Yes

Request for Fee Waiver

This section is for investigators who would like to request for a fee waiver due to special circumstances.

64. Please list reason for fee waiver qualification. *

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