

Part I. Basic Study Information

1. Today's date: Click or tap to enter a date.

2. Full study title:

3. Principal investigator

- Name:
- Institution:
- Address:
- Phone:
- E-mail address:

4. Collaborator(s)

- Name:
- Institution:
- E-mail address:

Part II. Lab Form

1. How did you hear about this resource?

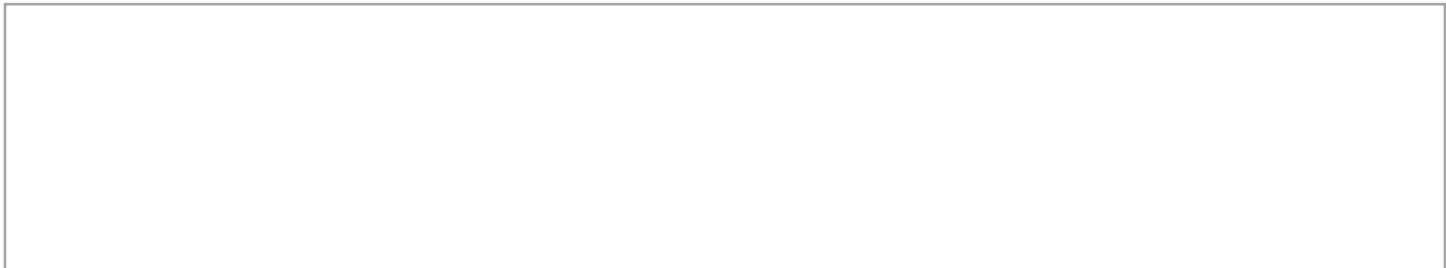
2. What type of biospecimen is needed (example – plasma, serum, bloodspot) and from what Wave?

Wave	Serum (250 uL)	Plasma (250 uL)	DNA (1 ug)	RNA (1 ug)	Dried Blood spots	Stool Microbiome	Oral Microbiome
Wave IV					<input type="checkbox"/>		
Wave V	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Wave VI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	

3. How much volume do you expect to need per biospecimen?

4. In order to maintain the integrity of your testing, what specific conditions, if any, do the biospecimens need to have been collected under? For example, participant fasted beforehand. Please provide justification.

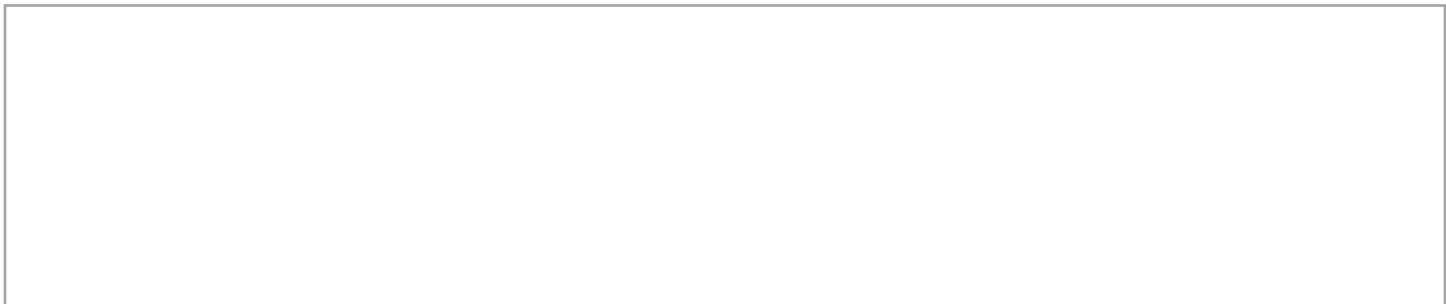
5. In order to maintain the integrity of your testing, in what condition should your biospecimens have originally arrived at our Add Health partner lab, Laboratory for Clinical Biochemistry Research (LCBR)? For example, within 24 hours or 48 hours of collection, chilled on arrival, etc. Please provide justification.



6. Can your assay be completed at Add Health's partner lab (LCBR) at the University of Vermont? If not, why and which alternate lab(s) do you propose to perform your assays? Please provide their contact information.



7. What assays do you want to perform?



8. Additional questions for lab.

