

## DAIDS VAX004 Specimen Access Approval Application

Co	ncept	Applican	nt:	Date:_	
	-				
		Phon	e:		
		E-ma	nil:		
Proj	ject Me	embers:	Co-Investigator(s):		
This s	study r	equests th	ne following:		
Yes	No				
		Participant	t PBMC specimens		
		Participant	t plasma specimens		
		Participant	t serum specimens from VaxGen (	(pending VaxGen approval)	
		Participant	t semen specimens		
		Other data	a collection (may require either DAIL	IDS alone, or DAIDS and VaxGen approval)	
				ess to these DAIDS VAX004 specimens, and <u>not</u> for receiving NIH funding. hrough a peer review grant mechanism), will the application be withdrawn?	
Conce	ept She	et: Each ap	oplication must be accompanied by	a concept sheet that must include the following information:	
	•	•	, , , , , , , , , , , , , , , , , , , ,	ess, phone and fax numbers, e-mail address, project title, date of application, rt date, and projected duration of study.	
В	Budget:	Identify sou	irce of funds to support the propose	ed evaluation(s).	
D	escript	ion of Propo	osed Activity: (Must be four pages	s or less, single-spaced, 11 point type size.)	
				ackground information, implications of prior research, anticipated relationship for use of these specimens (see attached list).	
H	ypothes	es/Study O	<b>Objectives:</b> The major study objective	ives.	
				cluding, as appropriate, details regarding: 1) type, volume, and number of ; and 2) data collection/access required (e.g., VaxGen data on volunteer	

specimens required (e.g., number of specimens/subject); and 2) data collection/access required (e.g., VaxGen data on volunteer demographics, decoding of samples, viral sequences, etc.). Specify the sources of data to be analyzed, including VaxGen-collected data variables, or new variables to be collected. Identify whether preliminary (unaudited) VaxGen data is needed for early modeling and/or if final (audited) data will be needed to complete the analysis.

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**Planned Tests:** Indicate planned tests (drug assays, immunologic, genetic, and virologic tests, unique and/or costly tests). A schedule is not required.

Study Population/Co-enrollment: Comment on whether this is a stand-alone study or involves the use of specimens from other protocols (specify protocols).

Statistical Issues/Sample Size Estimate and Rationale: Specify an analysis plan and include the required sample size. If appropriate, provide power calculations for primary objective(s). Provide a detailed description of outcome measures (dependent variables) to be used in answering the study objectives.

**Animal Use and Human Subjects Requirements:** If project involves use of animals or human subjects, include IRB/EC approval number (or pending application number) and approval date. Verify that the activity is covered under the parent study informed consent form.

E-mail or fax completed *Application* and *Concept Sheet* to:

## DAIDS VAX004 Specimen Access Approval Panel

**E-mail**: jwarren@niaid.nih.gov Inquiries: Dr. Jon Warren (DAIDS/NIAID), Executive Secretary, **Fax**: (301) 402-3684 DAIDS VAX004 Specimen Access Approval Panel, (301) 402-0633

**Note**: Petitioning investigators must also submit a DAIDS VAX004 Specimen Material Transfer Agreement.