Requesting Access to MIDUS/MIDJA Genomic Data

Please complete this document and return it along with your current CV to midus_genomics@aging.wisc.edu.

1. Primary Investigator and Study Team: Provide the full legal name, institution, email address, and mailing address of the primary investigator. Then provide the full legal names, institution, email address, and mailing address of each additional internal collaborator as well as trainees and staff directly supervised by the PI. External collaborators need to apply separately for data access.

Study Team	Full legal name	Institution	Email address	Mailing address
Primary Investigator				
Study Team Member 1				
Study Team Member 2				
Study Team Member 3				
Study Team Member 4				
Study Team Member 5				
Study Team Member 6				
Study Team Member 7				
Study Team Member 8				

2. Only one person can be authorized to access the data. This will typically be the PI, but could be a designated member of the Study Team. Regardless of who is designated, they must be equivalent to a tenure-track professor, or senior scientist/researcher with responsibilities that likely include laboratory administration and oversight. Who should be authorized to access the data?

PI (Go to Section 3)   Designated Team Member

2a. Identify the designated team member and describe their role in your project.

3. Please describe your research background and project rationale, including the MIDUS sample(s) you intend to work with. Inclusion of PubMed links to publications, in lieu of a citation list, is encouraged. This information will be kept confidential.

4. Will you be working with external collaborators? <u>External collaborators need to submit their own requests for data access if they need direct access to the data.</u>

        Yes   No

4a. Provide the names and institutions of external collaborators and describe their roles in your project:

4b. Will the external collaborators need direct access to the data? (If yes, make sure your external collaborators submit their own requests for data access to be processed with your request.)

           Yes   No

5. Please provide a descriptive title for your project.

6. Please provide a description or abstract of your project. This should be a non-technical summary of the proposed research. Please specify the MIDUS sample(s) you intend to work with. If the project is approved, this statement may be included in public documents such as grant progress reports.

7. Specific MIDUS data resource requested (select all that apply):

        Imputed SNPs

             MIDUS 2

             MIDUS Refresher

             MIDJA

        MIDUS Refresher RNA Expression Values

8. Study design: This information will remain confidential.
8a. Hypothesis (1-2 sentences):

8b. Outcome(s) (1-2 sentences; may include a specific subset of genes, a composite score, or genomewide scan):

8c. Predictor(s) (In one paragraph please describe specific predictor variable(s), or a set of variables related to a specific theme, or a combination of variables such as an interaction):

8d. Control variables/covariates (if any; 1 paragraph):

8e. Statistical analysis model (1 paragraph):

8f. Please describe your approach to multiple testing of gene-level data (e.g., single integrated test statistic; single composite score; multiple parallel tests with control of false discovery rate or family-wide error rate; etc.):

9. Cloud Use Statement. Investigators who wish to use cloud computing for storage and analysis of MIDUS Genomic data must request permission to do so. Would you like to request the use of cloud computing for storage and analysis of MIDUS Genomic data?

Yes   No

9a. Identify the cloud service provider or providers that will be employed:

9b. Please describe how the cloud computing service will be used to carry out the proposed research:

10. Data Sharing Agreement. Approved applicants will be asked to sign a Data Sharing Agreement (DSA) and will then be given a link and instructions for accessing the requested data. The DSA will ask the applicant to agree to several conditions of use some of which are described in general below. Please review and then check the box for each item below to acknowledge your awareness of these requirements.

Permission to use the genomic data is granted to me at my current institution. Only I and members of my study team (staff, trainees) staff will have access to any MIDUS genomic data.

If I leave my current institution, I understand that I must reapply for permission for continued access to these data, and that this is also true for graduate students and other staff members who change their institutional affiliation.

No attempt will be made by me or my staff to identify individual respondents for any purpose. I understand that any such attempt may void permission to use the data.

I and my study team will store the genomic data, and use it (and any data sets derived from it) in a secure computing environment. The data files with this information will be maintained in a secure manner, with access restricted to authorized persons according to NIH guidelines (https://osp.od.nih.gov/wp-content/uploads/NIH_Best_Practices_for_Controlled-Access_Data_Subject_to_the_NIH_GDS_Policy.pdf).

Approval for use of these restricted data is restricted to the specific use described above. Other uses (e.g., analyses addressing other hypotheses/objectives) are not permitted until a Request for Access is approved for those other specific uses.