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| **RESEARCH PROPOSAL FOR USE OF DCVAS DATA OR SPECIMENS**  *Proposals will be reviewed by the Study Steering Committee. The person making this request agrees to only use the clinical data/specimens provided for the specific project outlined below and will not transfer any data or specimens to other investigators. This form is to be used for proposals that are part of the original DCVAS protocol as well as for new project ideas that you may have. Please complete all sections, keeping to a maximum length of two pages. If successful, we will forward a collaboration agreement to you for your signature which contains our standard terms of use.* | | | | | | |
| **Study Title** | | Diagnostic & Classification Criteria in Vasculitis Study (DCVAS) | | | | |
| **Sponsor** | | University of Oxford | | | | |
| **Lead Collaborators** | | Professor Raashid Luqmani, Professor Peter Merkel, Professor Richard Watts | | | | |
| **Ref No.** | **Title of proposal** |  | | | | |
| **Investigators/authors** (list lead researcher and other key personnel) | |  | | | | |
| **Affiliation/position** | |  | | | | |
| **Source** (e.g. study database, biological specimens) | |  | Does this project conform to the **original DCVAS protocol?** (see task list for DCVAS available at [www.dcvas.org](http://www.dcvas.org)) | | | Yes/No |
| **Specific data variables** (refer to data dictionary) **or specimens requested** (volume and type, patient group) | |  | | | | |
| **Objective /aims** (one sentence) | |  | | | | |
| **Proposed analysis** (include brief background, design, methods of analysis, lab processes as applicable) | | | | | | |
|  | | | | | | |
| **Funding** | |  | | | | |
| **Expected timeline** (estimated start date, publication date) | |  | | | | |
| **Compiled by** | |  | | **Date requested** |  | |
| **Outcome of committee review** | |  | | **Date of review** |  | |