Request for Subjects

from the Layton Center for Aging and Alzheimer's Disease Research

We encourage use of our core facilities and specialty staff. In order to equitably honor investigator requests for resources please provide the information requested below.

You will receive notification regarding the status of this request after it has been reviewed and evaluated by the appropriate Center designated contact(s). If you have any questions please call (503) 494-6977 or email guarigli@ohsu.edu

Date of this request:

Principal Investigator Name (please attach CV):

Email:

Phone#:

Institutional Affiliation:

Co-investigators:

Source of Support:

Project Name and purpose of study with clear statement of hypothesis. (Please also attach study protocol, consent form, and Institutional Review board approval statement when applicable):

Objectives for this project:

Subject Requirements: (e.g. Age at onset, sex, diagnosis, test scores, etc.)

List Specific Data Elements you will need: (e.g. Demographics, test scores)

Export Requirements: (cross sectional vs longitudinal; spreadsheet layout; Statistical software you will be using to analyze data (Statview, SPSS); Platform (Macintosh, Windows); Format required by your statistical software.

I _____ have read and agree to comply with the Layton Center for Aging and Alzheimer's Disease Research Data Use and Disclosure and Authorship Policies. Date: _____

Note: Any publications that result from research involving Center subjects must include the following acknowledgement: "This research was supported in part by the Alzheimer's Disease Center NIA Grant P30 AG08017".

ADC Designated Contact Signature_____ Date: _____