**BACKGROUND**

Please describe your scientific question for DECISION by completing this form and sending it to PMO (info@decision-for-liver.eu) to support your data access request. The DECISION Data Access Committee will evaluate your proposal. After approval, data access will be granted via the data hub.

**RESEARCH PLAN**

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| **APPLICANT/PROJECT-SPECIFICATION** |
|  | **Date of request***DD/MM/YYYY* |  **Title of the Project***Please add a descriptive project title here* |
|  |  **Responsible scientist**Last name, first name:Institution:Email: |  |
| **1.** |  **Participating scientist** Last name, first name:Institution:Email: |  |
| **2.** |  **Participating scientist** Last name, first name:Institution:Email: |  |
| **3.** |  **Participating scientist** Last name, first name:Institution:Email: |  |
|  | **Planned time frame of the project/ of using data** | **From (DD/MM/YYYY):**  **To (DD/MM/YYYY):**  |
|  | **Purpose of data usage** |  DECISION - specified project task (If this option is selected, skip to Signature section)  DECISION - work not specified as task External request (non-project members) |
|  | **Scientific background/ primary and secondary objectives/aims of the study:** | *Please add a short description of the general aim & hypothesis to be assessed* |
|  | **Study design & methods** | *Please add a short overview of the number of subjects needed, inclusion/exclusion criteria to be applied, techniques and tools to be used, overall approach* |
|  | **Potential conclusions / relevance of results for DECISION** | *Please add a comment on the expected outcomes for this scientific question and how this links to the work done in DECISION* |
|  | **Further comments:** |  |
| I confirm to have all ethical and legal permissions for the conduct of my study / experiment.If data access is granted, the data will be used only for the purpose specified in this form. In case of misconduct, the rules of the DECISION Grant Agreement and Consortium Agreement apply. **Date Signature**  |