

Outgoing Data Transfer Request Form

Please fill in the information below. For outgoing data transfers, SPA will prepare a draft DUA and send to the recipient organization. Once the negotiations are completed, SPA will circulate the document for signatures and advise if anything else is needed (e.g., IRB approval may be required before the DUA can be fully executed. This will depend on the type of data being exchanged).

State the specific data requested (i.e. specific neuropsychological measures, particular neuroimaging data such as resting fMRI or T1). Include whether you need raw or preprocessed data. For intended activities, please state the question(s) to be examined and the analyses to be performed. Please email the signed form to Oriana Myers: [otm2106@cumc.columbia.edu](mailto:otm2106@cumc.columbia.edu). Please note that data requests may take a substantial amount of time to process depending on the amount of data requested.

Contact information of the external organization and its personnel, for which you will be exchanging human material and/or data:

Organization Name	_____
Name of Investigator	_____
Investigator email address	_____
Admin. Contact Name	_____
Admin. Contact's email	_____

Please indicate which study the proposed transfer is associated with:

- CogRes
- RANN
- Other (Please specify: \_\_\_\_\_)

Please indicate which timepoints you would like to include:

- Timepoint 1 (Baseline)
- Timepoint 2 (5-Year Follow-Up)

Briefly describe the data you are requesting. If available, include quantity of data, description of data elements, and original source of the data.

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Please describe your intended activities using this data:

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If you have a draft agreement from the external organization pertaining to the transfer of material and/or data, please attach a copy.

Do you expect a joint publication or co-authorship of the results with the external organization?

Yes

No

I'm not sure

If you have any additional comments you'd like to add about the proposed transfer of materials and/or data, please include them here:

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Acceptance of RANN/CogRes data obligates the recipient to reference the appropriate grants from the list below supporting this project in any presentation or publication that may result from this research. Should publications result from the use of RANN/CogRes data now or in the future, the recipient agrees to notify the PI, Dr. Yaakov Stern, with details (reference or PubMedCentral ID#) and provide a copy of the publication so that RANN/CogRes may report productivity derived from our resources to the funding agency, the NIA. Such publications require compliance with National Institutes for Health (NIH) public access policies.

**RANN:** RF1AG038465

**CogRes:** R01AG026158

Signature: \_\_\_\_\_ Date: \_\_\_\_\_