**Request for access to data from STOP-HCV datastore**

*Please complete all fields and email to* [*ellie.barnes@ndm.ox.ac.uk*](mailto:ellie.barnes@ndm.ox.ac.uk)

|  |  |
| --- | --- |
| Date: |  |
| Name: | Title: Dr  Prof  Mr  Ms  Other |
| First name:  Surname: |
| Email address: |  |
| Institution: |  |
| Address: |  |

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| Purpose of data request (250 words max): |
| *Please provide a description of the project where STOP-HCV data will be used (title, background, aims).* |

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| Data requested (as described in STOP-HCV data directory): |
| *Please state the type of data requested and format required for analysis.* |

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| Use of data: |
| *Please describe the methods that will be employed during the use/analysis of STOP-HCV data.* |

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| --- | --- |
| Do you require clinical data? | Yes  No |
| *If yes, please list clinical data fields required:* | |

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