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

*Please complete all fields and email to* *ellie.barnes@ndm.ox.ac.uk*

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| --- | --- |
| 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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