



APPLICATION FOR BIOSAMPLE ACCESS

Purpose

Please submit this Application for Biosample Access if you meet both of the following criteria:

- You are an investigator with funding and resources in place for a defined study, and
- You are ready to request specimens from the TSC Biosample Repository.

If you do not yet have funding and require a letter documenting the availability of specimens to include with your funding application, **do not submit this form**. Instead, please write a one-page Letter of Intent describing your research project, the need for biosamples from the repository, and the potential impact of your project on the TSC community. We encourage investigators who are applying for funding to correspond with TS Alliance staff as early as possible to determine whether the TSC Biosample Repository has the specimens they need.

Process

Applications are accepted on a rolling basis. After an administrative review by TS Alliance staff, the Natural History Database and Biosample Repository Steering Committee will review the application in accordance with the review criteria within 4 weeks. If a quorum (majority) of the committee approves, the TS Alliance will send a Material Transfer Agreement to the investigator. The Biorepository personnel at the Van Andel Research Institute will work with the investigator to arrange shipment of samples.

When complete, please compile this application **and attachments below** into a single .PDF and upload to Dropbox: <https://www.dropbox.com/request/5qgBkjFyrTEGohvPSrti>

Attachments

- Investigator CV or NIH-style Biosketch
- IRB Approval (or exemption) letter

Attach a copy of your Institutional Review Board (IRB) approval letter for this project. Please ensure the letter includes the project title. If your project has been determined to be exempt, please attach a letter from an appropriate official (IRB chair, department chair, etc.) other than the PI stating your proposed use of human samples is authorized and universal precautions will be observed during handling.

Please ensure that your IRB approval or exemption will allow you to use biosamples and natural history data collected for the TSC Biosample Repository and TSC Natural History Database projects. If you have any questions about your IRB approval, please contact biosample@tsalliance.org.

Process for requesting samples and data

Researcher submits request for biosamples



- ✓ Application for biosample access
- ✓ Investigator CV/biosketch
- ✓ IRB approval or exemption letter

Application reviewed by the NHD-BSR Steering Committee



- ✓ Sample availability
- ✓ Scientific merit
- ✓ Benefits of proposal

Request reviewed and approved



- ✓ Modifications made if necessary
- ✓ PI institution completes MTA including agreement to share data with the TSC Alliance

Sample processing and shipping by VAI



- ✓ Plasma, WBC pellets, DNA
- ✓ Frozen or fixed tissue samples, slides

Application Form

Principal Investigator Information

Date of Request:

First Name:

Middle Name:

Last Name:

Salutation:

Degree(s):

Title:

Phone:

Alt. Phone:

Fax:

Email:

CC Email:

Mailing Address

Institution:

Department:

Address Line 1:

Address Line 2:

City:

State:

Zip:

Country:

Institution's Federal Congressional District:

Funding source(s) to support the proposed work, including specific award numbers:

PI Demographics (Optional)

This information is optional but is vital to track the TSC Alliance's progress toward improving the equity, diversity, and inclusion of our research programs. The information will not be disclosed or disseminated to anyone outside of the Steering Committee and the TSC Alliance. The information will not be used to decide whether a specific application is approved or not.

Gender:

Self-Describe:

Race: (ctrl + click to select multiple)

Self-Describe:

Ethnicity:

Shipping Information

Lab Contact/Recipient

Same as PI information

First Name:

Middle Name:

Last Name:

Salutation:

Degree(s):

Title:

Phone:

Alt. Phone:

Fax:

Email:

CC Email:

Mailing Address

Same as PI information

Institution:

Department:

Address Line 1:

Address Line 2:

City:

State:

Zip:

Country:

Study Information

Study Title:

Abstract/Summary of Study (limit to 1200 characters, with spaces):

Specific Aims (limit to 300 characters, with spaces):

Long-term Study Objectives (including impact to TSC community, limit to 300 characters, with spaces):

Experimental Design and Methods (limit to 300 characters, with spaces):

Justification for Numbers (volume or quantity of samples requested; include statistical power analysis, if applicable. Limit to 300 characters, with spaces.)

How soon will you use the biosamples once received?

Along with the biosamples, you will be entitled to receive any data generated by other investigators using these samples. In return, you are required to share data generated on each sample with the TSC Biosample Repository. Data can be embargoed for a period to be defined in the Material Transfer Agreement to provide time to publish, protect intellectual property, etc.

Describe any other ways you plan to share the data, results, and resources that are generated (limit to 300 characters, with spaces):

Specific data elements that will be provided back to the TSC Biosample Repository for each sample analyzed:

Request Information: Donor

Details Donor Demographics

Sex:

Race (hold ctrl and click for multiple): Any

Ethnicity Not Hispanic or Latinx
Hispanic or Latinx Any

Age range:

Minimum: Maximum:

Donor Clinical History (please list any inclusion and exclusion requirements):

Inclusion: Exclusion:

Total number of donors requested:

Sample Preparation Details

Blood Prep Type

Plasma Volume: mL μ L

White Blood Cell Pellets Number of cells per sample:

Other (please explain):

Nucleic Acid – From **Blood**

DNA

Minimum Quantity: Maximum Quantity:

Minimum Concentration: Maximum Concentration:

Minimum Volume: mL μ L

Nucleic Acid – From **Buccal Swabs**

DNA

Minimum Quantity: Maximum Quantity:

Minimum Concentration: Maximum Concentration:

Minimum Volume: mL μ L

Nucleic Acid – From **Tissue**

DNA

Minimum Quantity: Maximum Quantity:

Minimum Concentration: Maximum Concentration:

Minimum Volume: mL μ L

Tissue

Fresh Frozen FFPE

Tissue Curls Thickness: Number of curls:

Glass Slides # Unstained: # H&E Stained:

Other Preparation Details

Please describe, including specifics as appropriate:

Any other considerations we should be aware of?

Natural History Database (NHD) Data

Will your project also use data stored in the NHD?

YES

NO

If YES, please fill out the [NHD DATA REQUEST FORM](#) along with this [APPLICATION FOR BIOSAMPLE ACCESS](#).