Nagasaki Islands Study研究責任者 殿

To President of the Nagasaki Islands Study Steering Committee

長崎大学・Nagasaki Islands Study (NaIS) の保存検体を利用したく、申請書を提出いたします。

I submit this application to use stored specimens held by the Nagasaki Islands Study (NaIS) by Nagasaki University.

Nagasaki Islands Study

保存検体利用の申請書 / Application Form for Use of Stored Specimens

|  |  |
| --- | --- |
| 申請者氏名Applicant’s name |  |
| 所属機関 / Affiliation |  |
| E-mail address |  |
| 共同申請者氏名・所属Co-applicant's name(s) and affiliation (s) |  |
| 検体の内容 / Samples | [ ]  血漿 / Plasma[ ]  血清 / Serum[ ]  DNA |
| 検体の採取時期Year when specimens were collected | [ ]  2014　[ ]  2015　[ ]  2016　[ ]  2017　[ ]  2018　[ ]  2019[ ]  2021 |
| 対象者 / Subjects | [ ]  全ての研究参加者 / All participants[ ]  一部の研究参加者 / Some of the participants 対象者について記載して下さい。 / Please describe the subjects. |
| 検査項目 / Test items |  |
| 検査委託機関An institution to which you will order the test |  |
| 検体の必要量Quantity of sample requirements |  |

|  |  |
| --- | --- |
| 検査費用 / Costs | 見込まれる検査費用を記載して下さい。Please provide the expected costs of the test. |
| 資金 / Funding | 検査費用にあてる資金の提供元、助成金、助成期間を記載して下さい。Please provide the source of funding, the grant, and the duration of the grant for the test. |
| 利益相反Conflicts of interest | 検査内容や検査委託機関について、開示すべき利益相反はありますか。Are there any conflicts of interest that should be disclosed regarding the test items or the institution to which you will order the test?[ ]  なし / No[ ]  あり / Yes 内容を記載して下さい。/ Please provide the contents. |
| 限りある保存検体を用いて検査を行う意義や科学的妥当性を記載して下さい。Describe the significance and scientific relevance of the test with stored specimens of limited quantity. |