

Secondary Use of Biospecimens Ethics Compliance Form

Project Title

Principal Investigator

Institution/Affiliation

Email

Title of Original Study (if applicable)

Source of Biospecimens

Type of Biospecimens

Quantity/Volume Requested

Purpose of Secondary Use

Will biospecimens/data be identifiable?

Ethics/IRB Approval Number (if available)

Date of Approval

Was original informed consent obtained for future/secondary research use?

Additional Information/Comments

Principal Investigator Signature

Date