## **Genomic Data Research Informed Consent Waiver Request**

## **Protocol Information**

Protocol Title
Principal Investigator
Protocol Number
Date of Submission
Research Description
Briefly describe the purpose of the research involving genomic data
Justification for Waiver of Informed Consent  State why it is not practicable to obtain informed consent from participants
The first place access to obtain microred concent from participants
Describe steps taken to minimize risks related to privacy and confidentiality
Explain if and how the rights and welfare of participants will be protected

## **Genomic Data Details** Type(s) of genomic data to be used Source(s) of genomic data Will data be shared with third parties? If yes, explain **Additional Information** Include any other relevant information supporting the waiver request **Investigator Certification** Name Signature Date