

Data Analytics Core Request Form

Please complete the survey below. Try to provide as much information as possible. After receiving your survey, someone from the biostatistics core will contact you shortly. Please note that we may ask you to provide additional information about the scope of your request. If you have any questions please contact Xiangqin Cui at Xiangqin.Cui@emory.edu.

Investigator/Requester Name

Date of Request

Date Completed *(to be filled in by DAC)*

**Institution Administering Project
(check all that apply)**

VA
Emory SOM
Emory SON
Emory SPH
AREF
Morehouse
Georgia Tech
Georgia State
Other

Title of Project

Preferred E-mail Address

Alternate E-mail Address

Preferred Phone Number

SECTION B

Please indicate whether or not your work is supported by funded research.

VA Funded Research

Federally Funded Research (NIH, DOD, CDC, etc.)

Funded Research Other than Federal (private, university, other)

Unfunded

SECTION C

Please indicate the type of biostatistical support services being requested (check all that apply).

Initial Consultation

Data Extraction

Database Development

Data Analysis

Manuscript/Poster Development

Full Analytical/Statistical Support

Award Submission

VA

Non-VA Federal

Non-VA Non-Federal

Other (Please describe below)

Describe the project/need and provide any other information regarding the request.

Please specify a deadline when this work need to be completed. Please be as specific as possible.