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| Commercial involvement in the Project  If a commercial party is (directly or indirectly) involved in the Project, the Requested Data can only be provided to the Applicant under certain circumstances. | | |
|  | **Is a commercial party (directly or indirectly) involved in the Project?\***  If so, please state the involved commercial party (please name the legal entity):  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  \*If a commercial party is (directly or indirectly) involved in the Project, the Requested Data can only be provided to the Applicant under certain circumstances. In such event, Hartwig Medical Foundation may ask the Applicant to provide additional information. | Yes  No |

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| Data Request Form  Additional information request regarding commercial involvement |  |

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| Commercial involvement in the Project  If a commercial party is (directly or indirectly) involved in the Project, the Requested Data can only be provided to the Applicant under certain circumstances. In order to assess whether the Requested Data can be provided to the Applicant in this specific case, additional information is required. | | |
|  | **Please name the commercial party (directly or indirectly) involved in the Project (please provide the full name of the legal entity and address):**  …………………………………………………………………………………………………………………………………………………………………….....  ………………………………………………………………………………………………………………………………………………………………..……...  ……………………………………………………………………………………………………………………………………………………………………….. | |
|  | **Please describe the relation between the Applicant and this commercial party with respect to the Project:**  …………………………………………………………………………………………………………………………………………………………………….....  ………………………………………………………………………………………………………………………………………………………………..……...  ……………………………………………………………………………………………………………………………………………………………………….. | |
|  | **Please describe the role of the commercial party in the Project:**  …………………………………………………………………………………………………………………………………………………………………….....  ………………………………………………………………………………………………………………………………………………………………..……...  ……………………………………………………………………………………………………………………………………………………………………….. | |
|  | **Please provide a copy of the following documents:**  Latest annual report of the commercial party involved in the Project;  Applicable articles of association of the commercial party. | |
|  | **Is it intended to share the Requested Data with the commercial party in the context of the Project or only the results of the Project (so no raw clinical and genomics data)?**  Requested Data (including clinical and genomics data) will be shared with the commercial party.  Only the results of the Project carried out by the Applicant will be shared with the commercial party. No Requested Data (clinical and genomics data) will be shared with the commercial party. | |
|  | **Please describe for what purposes and how the results of the Project will be used by the commercial party involved in the Project:**  …………………………………………………………………………………………………………………………………………………………………….....  ………………………………………………………………………………………………………………………………………………………………..……...  ……………………………………………………………………………………………………………………………………………………………………….. | |
|  | **Is it intended to publish the results of the Project also if they are negative?**  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  If so, please state in what (scientific) journal the results of the Project are intended to be published:  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….… | Yes  No |

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| Other remarks/Questions  Please include any other information related to this Data Access Request that could be relevant for evaluation thereof. | | |
|  | ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….…  ……………………………………………………………………………………………………………………………….… |  |