For Admin Only Request #



Individual Data Request Form

TRAFFIC RECORDS INTEGRATION PROGRAM

Instructions: Use this form to request linked data and Individual Data Variable Request Form from the Office of Financial Management's TRIP data warehouse.

Requester Contact Information				
	Date Submitted:			
	Requester's Name:	Requester's Title:		
	Requester's Organization:	Department:		
	Email address:	Phone:		
Principal Investigator's (PI) Name:		PI Title:		
	Pl's Organization:	Department:		
	Email address:	Phone:		
Proj	ect Information			
1.	Project Title:			
2.	What type of request are you submitting? Check th	e box below.		
	☐ New data request			
	\square Request for additional data or a "refresh" of data under prior request with TRIP			
	Prior request number (R#):			
	Data-use agreement number (K#):			
3.	What type of project will be supported by this data request? Check the box below.			
	\square Mandated government or legislative report	\square Grant-funded research		
	☐Thesis or Dissertation project	\square Report by a state or local government agency		
	\square Other project type (Explain below.)			

4.	Does your project intend to produce generalizable knowledge (research), as defined by the <u>Washington State Institutional Review Board (WSIRB)</u> ?
5.	Have you received outside funding to conduct this study? ☐Yes (Explain below.) ☐No
5.	Describe the education program(s) that are part of your analysis, including the program name and purpose
7.	Describe the purpose and scope of your project. Explain your project objectives and how you plan to
	evaluate the program(s).

8. List the key research questions that your project will address.

9.	Describe the project's study population(s), including any comparison groups or cohorts, as well as time elements. (Examples: All drivers between the ages of 18-25 who have an alcohol related collision)
10.	Please describe your study design, methods, and planned analysis (1,500 characters max). If necessary, use the TRIP Variable Request Form linked in #11 or a separate document for equations or other important details.
Rec	quested Data
11.	What specific data elements are you requesting, and for what time periods or cohorts? Complete the TRIP Individual TRIP Variable Request Form to help TRIP understand how you would like the data structured (e.g., specific demographics and date ranges, BAC, Contributing Circumstances, etc.). Note: Data requests for a substantial number of variables, cohorts, or records may require more scrutiny from TRIP and a lengthier IRB process.
Ext	ernal Data
12.	Will you provide TRIP with any other data to link or combine with the data you have requested in your TRIP Variable Request Form ?
	\square Yes (Explain below, including the number of records that \square No TRIP would need to link.)

Cor	ntact with TRIP's Partnering Data Contributors	;		
13.	Have you consulted with any of the TRIP's partneri contributors about your study questions, rationale	-	☐ Yes (Explain below.)	□ No
Tim	neline and Software Expectations			
14.	What's your ideal date to receive the requested da	ıta?		
	Note: The time it takes TRIP to review and fulfil	-	=	
	the data, external matching needs, legislative sources. Please allow TRIP at least six (6) mon	-		
	Sources. Freuse allow Triff at least six (o) morn	ins to review	una (ij approvea) jaijin your	request.
15.	How many months do you expect your analysis to	take?		
16.	What software programs/applications do you plan	to use to ana	lyze this data? Check all that	apply. <i>If your</i>
	request is approved, then this information will help	the TRIP dete	ermine the best way to share	data with you.
	☐ SAS	☐ Sta		
	☐ SAS Enterprise Guide☐ R / RStudio		at Transfer S SQL Server	
	☐ Python		her (please specify):	
Dod	www.catawa.Coutification and Signature (Chaple ha	ath haves hel		
	quester's Certification and Signature (Check bo		•	
\boxtimes	TRIP is required to review any and all draft mate			
publications, presentations, and/or data dashboards). TRIP must also send the draft materials to data contributors for their review and feedback. I will submit all draft materials that use the data request in this form to TRIP for review before any materials are shared with anyone not listed in the data-				
	least ten (10) business days to review the draft	materials.		

Requester's Signature		Title	Date		
Reque	ester's Signature	Title	Date		
	E-mail the following documents to the TRIP Inbox:				
	☐Individual Data Request Form				
	☐TRIP Variable Request Form				
	Thank you for your submission!	TRIP will connect with you after reviewing	your request.		