

Human Health Exposure Analysis Resource (HHEAR) Waiver Request

Instructions: *If an investigator is unable to comply with any of the HHEAR Policies, the investigator must submit this form to request a waiver. Depending on the type of request, the HHEAR Executive Committee, Coordinating Center, Data Center, or Lab Hub(s) may review the request.*

Applicant/Investigator Information:

Project #:

Principal Investigator:

Institution:

Proposed HHEAR Project Title:

Date of Request:

Waiver Request:

Requested Wavier for (mark all that apply):

- Eligibility criteria
- Data submission and sharing
- Material Transfer Agreement
- Sample labeling with HHEAR SIDs

Requested Waiver: *Provide a detailed explanation of why you are requesting a waiver.*

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For Sample Labeling Waivers Only:

Did you email a photograph of your original sample IDs to
HHEAR_CC@westat.com upon submission of the Waiver Request Form?

Yes No

Date photograph of original sample IDs was sent: