

Date: \_\_\_\_\_

School of Public Health Office of Student Research  
The University of Texas Health Science Center at Houston  
1200 Pressler Street  
Houston, TX 77030

Re: Permission for Use of Data/Samples

Dear SPH Office of Student Research,

I am giving permission to \_\_\_\_\_ to analyze the data/samples collected during the project, \_\_\_\_\_, expressly for the \_\_\_\_\_ project titled, \_\_\_\_\_.

There \_\_\_\_\_ identifying variables in this dataset. The student \_\_\_\_\_ have access to identifiers.

I certify that: (select one, if applicable)

Data for this study are being collected with the approval of the UTHealth Institutional Review Board (**HSC-SPH-**\_\_\_\_\_ - \_\_\_\_\_). \_\_\_\_\_ was added to the protocol as of \_\_\_\_\_.

The data was collected outside of UTHealth, a copy of the study's IRB approval letter is attached to this email.

The \_\_\_\_\_ is part of/or will be added to an active UT CPHS protocol. A copy of the CPHS letter approving the addition/personnel change is attached.

Sincerely,

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_