



# PennCHOP

## MICROBIOME PROGRAM

### THE PENN MICROBIOME PROGRAM HUMAN INTERVENTION CORE

#### **INFORMATION FOR INITIAL CONTACT**

Please complete this questionnaire to provide us with some initial information about your research project. Return the signed form to [nessel@mail.med.upenn.edu](mailto:nessel@mail.med.upenn.edu) and [uroy@mail.med.upenn.edu](mailto:uroy@mail.med.upenn.edu)

#### 1. Investigator information

Name  
Title  
Institution  
Department  
Address  
Telephone  
Email

#### 2. Is this a fee-for-service request or proposal for collaboration?

Fee-for-service  Collaborative  Unknown

#### 3. Are you interested in consultation only (i.e. pre-project planning)

Yes  No

#### 4. Is the project IRB approved?

Yes  No

#### 5. Are you a junior investigator?

Yes  No

#### 6. If this project is the subject of a grant application, at what stage is the grant submission?

#### 7. Is this study the topic of a PENN-CHOP Microbiome Program funded pilot award?

Yes  No

8. Please provide a brief description of the research to be performed. Include the following information where applicable: what are the specific aims, what is the hypothesis, who are the participants, what is the sample size, and what are the goals of the project?

PI Signature  
PrintedName  
Date