Appendix: Data disclosure form fields and prompts
Red asterisks (*) indicate required fields and brackets frame clarifying author notes.

Contact Information

Are you the primary investigator / lead researcher? *
If you are a student please select "No" and provide the name of the faculty member you are working under. This is especially important for funded research.

☐ Yes    ☐ No

Your Last Name

Your First Name

Your Email Address *

Your Department/Unit
[SELECT FROM DROP DOWN LIST]

Primary Investigator/Contributor Information

PI Last Name *

PI First Name *

PI Email Address *

PI Department/Unit *

PI Citizenship *

Additional Contributors
Please list any additional contributors who participated in the creation of the data set, both Internal and/or external to ISU.
Data Set Information

Data title
The title of the data set; does not need to match the title of related publication(s).

Description *
Please provide a brief, non-confidential description of the data that you plan to publish including subjects, content, format, code, size, etc.

Choose a publishing license for your data: *
REQUIRED. The chosen license governs what other people may do with the data. More information about these licenses can be found at: https://instr.iastate.libguides.com/datashare/licenses

- CC-BY (Creative Commons Attribution)
- CC-0 (Creative Commons Zero)

Does the data contain information on sensitive subject matters such as:

Personally identifiable information (PII) *
(ex: full name, Social Security numbers, driver’s license number, email or mailing address)
- Yes
- No

Other personal information that could be identifiable *
(ex: age, location, gender, occupations, etc.)
- Yes
- No

Protected species and/or locations. *
(ex: information that would reveal the location of places or things that should be protected)
- Yes
- No

Confidential or proprietary data *
Data that cannot be shared with the public as it contains technical (e.g. trade secrets) or personal information (e.g. credit card numbers).
- Yes
- No
Additional information

Please include any additional information to help inform your disclosure, i.e. deadlines, MTA, NDA, etc.

SPONSORSHIP AND SUPPORT

Was this dataset funded (in whole or in part) by Ames Laboratory? *

☐ Yes  ☐ No

If Yes, Ames Laboratory Project Title:

Were either internal (other than salary accounts) or external sources of funding utilized in the creation of this data set? *

☐ Yes  ☐ No

1st funding source: Type
Choose the first type of funding.

[SELECT FROM DROP DOWN LIST]

1st funding source: Name
ex: federal agency name, company name, start-up account, etc.

1st Worktag, ISU Account Number, or Ames Lab contract number

2nd funding source: Type:
Choose a second type of funding, if applicable.

[SELECT FROM DROP DOWN LIST]

2nd funding source: Name
ex: federal agencies, Company X, start-up account, salary account, etc.

2nd Worktag, ISU Account Number, or Ames Lab contract number

Names of any additional funding sources.

Additional funding Worktags / ISU Account Number(s)
RESEARCH ASSURANCES

RESEARCH ASSURANCES: Human Subjects *
Did the project involve human subjects?

☐ Yes  ☐ No

IF YES, please provide IRB Approval Number(s).

Please attest to the following statement:
By checking the box below, I assure that the data is de-identified and any combination of the variables will not allow for the identification of participants. Further, I assure that the data is released in accordance with the IRB-approved protocol and aligns with the data sharing details consented to by the research participants.

☐ [checkbox]

RESEARCH ASSURANCES: Live animals *
Did the project involve live vertebrate animals?

☐ Yes  ☐ No

If YES, please provide IACUC Approval Number(s).

RESEARCH ASSURANCES: Biohazards *
Did the project involve biohazardous material or synthetic nucleic acid molecules?

☐ Yes  ☐ No

If YES, please provide the IBC approval number(s).

RESEARCH ASSURANCES: Select Agents *
Does the data set include information about select agents?

☐ Yes  ☐ No

If YES, please explain.

RESEARCH ASSURANCES: Export Control *
Is an ISU Technology Control Plan in place for this research?

☐ Yes  ☐ No

RESEARCH ASSURANCES: Controlled Unclassified Information *
Has any data been deemed Controlled Unclassified Information (CUI)?

☐ Yes  ☐ No