

## Appendix: Data disclosure form fields and prompts

Red asterisks (\*) indicate required fields and brackets frame clarifying author notes.

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### 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**

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### 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.

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## 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)

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## 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

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## Additional information

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

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## 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.

**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.

**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)**

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## 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