|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |
|  |  |
|  |  |
|  |  |
|  |
|  |  |
|  |  |
|  |  |  |  |  |

|  |
| --- |
|  |
|  |
|  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |
|  |  |
|  |  |
|  |
|  |
|  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |
|  |
|  |
|  |

|  |
| --- |
|  |
|  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |
|  |  |  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |
|  |
|  |  |

|  |
| --- |
|  |
|  |
|  |
|  |
|  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
|  |

|  |
| --- |
|  |

|  |
| --- |
|  |

**人类遗传资源申报情况说明**

|  |
| --- |
| 方案名称（方案编号）： |
| 组长单位 |  | 联系电话/邮箱（机构） |  |
| 本中心PI |  | 联系电话/邮箱（PI） |  |

**1. 本项目是否需要进行科技部人类遗传资源审批或备案**

☐是 ☐否

**2.涉及的人类遗传资源活动类型**

☐采集 ☐ 保藏 ☐ 利用 对外提供 （☐遗传材料 ☐遗传信息）

☐以上均不涉及

**3. 涉及申请的人类遗传资源**

遗传材料（□细胞 □ 全血 □ 织/组织切片 □ 精液 ☐ 脑脊液 ☐ 胸/腹腔积液 ☐ 血/骨髓涂片 ☐ 毛发（带毛囊） □ 其他 \_\_\_\_\_\_\_\_\_\_\_ ）

☐遗传信息（包括基因、基因组、转录组、表观组及ctDNA等核酸类生物标志物等数据信息，以及与此数据相关的疾病、人种等关联信息，）

1. **涉及外资背景的参与方**

□ 申办者（☐中方单位 ☐ 外方单位）

☐ CRO （☐中方单位 ☐ 外方单位）

☐第三方实验室（☐中方单位 ☐ 外方单位： 服务器☐国内 ☐ 国外 ）

☐ 数据统计公司名称 （☐中方单位 ☐ 外方单位； 服务器☐国内 ☐ 国外）

☐其他

**5.审报类型**

□ 采集行政许可审批 ☐保藏行政许可审批 □国际合作项目行政许可审批 ☐遗传材料出境行政许可审批 ☐中国人类遗传资源国际合作临床试验备案 ☐中国人类遗传资源信息对外提供或开放使用事先报告

**6.本项目是否需要进行科技部人类遗传资源审批及备案**

□是 ☐否

**7.材料出境的申请原因 （如适用，需出境的，需要说明遗传资源出境的目的及必要性）**

申办者确保以上信息填写真实、准确。

 申办者名称及公章：

 日期：

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
|  |
|  |
|  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |
|  |

|  |
| --- |
|  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
|  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |
|  |  |  |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |