

Request Form Synthetic Dataset NCR

(items with * are mandatory)

1. First name*
2. Last name*
3. Email*
4. Reason for request of the synthetic dataset *
 - Software/algorithm development
 - Clinical research
 - To support submission of a data request
 - Other, specify below

.....

5. Describe how you are planning to use the synthetic data and for which purpose*

.....

6. Domain of organisation*
 - Healthcare
 - Academic
 - Consultancy
 - Pharma
 - Charity
 - Government
 - Education
 - Other, specify below

.....

I agree with the [terms and conditions of the synthetic dataset](#)

I am willing to complete a questionnaire about my experience using the synthetic data. (Your input is important to ensure that future releases will fit your requirements.)

- I am aware of the [privacy policy at iKNL](#) with respect to the processing of information provided through this form.

- If you would like to subscribe to our newsletter (in Dutch): [iKNL nieuwsbrief Onderzoek & Innovatie](#)