Please send back the form to <u>scientific affairs@exactis.ca.</u>

Name of Applicant:

Affiliation:

Contact Information (email, phone number):

Characteristics of the Population of Interest.

Cancer Type:

Stage(s):

If Stage IV, are you looking for specific metastatic location(s) in your population? If yes, please specify metastasis location(s) of interest:

If necessary, please provide a range for initial diagnosis date:

Treatments (If necessary, please specify the line of treatment):

If necessary, please specify if the patients need to have received a prior treatment or surgery or radiation:

Biomarkers (please specify the name of the gene and the list of specific mutation(s)/copy number variation (CNV)/fusion/status of interest):

If necessary, specify the testing method for the biomarker(s) identification:

What is the minimum follow-up time in months since the diagnosis of interest?

Other details: