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**THROUGH PSYCHOSIS BANK**

**Carnegie Mellon University**

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1. General description of the data set, and IRB Approval # (if available):

2. Restrictions to be placed on the use of the data:

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Date (year/month/day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mail this signed form to: Brian MacWhinney, CMU-Psychology, 5000 Forbes Ave. Pittsburgh, PA, 15213, USA or send a scanned signed copy to macw@cmu.ed