Secure Data Facility Access Agreement
Carolina Population Center, UNC-CH

In consideration of my request to be granted use of the Secure Data Facility (SDF) to access (name of data file(s) and dates of authorized use):

________________________________________________            ____________________,

________________________________________________            ____________________,

________________________________________________            ____________________,

________________________________________________            ____________________,

I ____________________________________________ (please print), am aware that the Secure Data Facility (SDF) is being made available to me by the Carolina Population Center in order to protect information in the files identified above. Specifically, SDF equipment and procedures are intended to prevent the release of any of the data in a form permitting identification of research subjects.

I have provided to CPC copies of: (1) my data protection plan, (2) the data provider’s authorization of my use of the data, and (3) a letter from my institution’s IRB endorsing my research use of these data.

I am also aware that I can be held legally liable for any harm incurred by individuals or establishments who have provided or are described in the information contained in the above work files to which I will have access.

Having familiarized myself with policies established by the data provider and with the contents of Secure Data Facility Procedures, I agree:

1. To make no copies of any files or portions of files to which I am granted access.
2. Not to use any technique in an attempt to learn the identity of any person, establishment, or sampling unit not identified on public use data files.
3. To hold in strictest confidence the identification of any establishment or individual that may be inadvertently revealed in any documents or discussion, or analysis. Such inadvertent identification revealed in my analysis will be immediately brought to the attention of both CPC’s Head of Systems, Tim Van Acker, and the data provider.
4. Not to remove any printouts, electronic files, documents, or media until they have been scanned for disclosure risk by authorized CPC staff.
5. Not to remove from SDF any written notes pertaining to the identification of any establishment, individual, or geographic area that may be revealed in the conduct of my research at SDF.
6. To allow the inspection of any material I may bring to or remove from the SDF.
7. To submit to CPC any papers or reports based on these data, to be examined for disclosure of confidential information.
8. Not to provide access to the SDF, or to reveal SDF entry codes to anyone.
9. Not to reveal the userid or password of any SDF computer accounts assigned to me.
10. Not to use the SDF resources to access a data set outside of the time period specified above.

If any of these conditions are violated, I understand that authorization to use the SDF may be withdrawn.

Signature:

__________________________________________ ____________
Researcher Date

__________________________________________ ____________
Faculty Sponsor (if applicable) Date

__________________________________________ ____________
SDF Manager Date

__________________________________________ ____________
CPC Director Date

Copies to:
  CPC SDF and Director Files
  Researcher
  Principal Investigator