

**Department of Epidemiology
School of Public Health
University of North Carolina at Chapel Hill**

Data Distribution Agreement for Use of Data by Co-investigators, Colleagues and Students

This Distribution Agreement is entered into as of:

Date: _____ (effective date)

Recipient's Name: _____

Recipient's Title (check one): Student Faculty Staff

Recipient's Institution: _____

Recipient's Surface Address: _____

Recipient's Phone Number: _____

Recipient's Email Address: _____

I have reviewed and understand the terms for use of the _____ data. I agree to
Project Name

abide fully by these terms, listed below:

1. These data are to be used for the purposes specified in the proposal attached to this agreement. The data may be used for exploratory analyses for the development of a manuscript proposal, as background information for grant proposals, and for teaching purposes. I will follow each study's policy concerning the attribution and citation of material used.
2. The data may not be shared with other individuals within my Institution or outside, or with commercial enterprises.
3. I will use the data set for purposes specified above and in compliance with _____
Project
policies.
4. I will abide by project guidelines, where they are specified, in the preparation and presentation of manuscripts and abstracts.
5. I understand that these files constitute confidential information and that I am responsible for the security of these data. I agree to avoid analyses or publish information that might be used to identify study participants. Further, I agree not to disclose any personal or confidential data or any information about a study participant either during or after the conclusion of my use of this data or to use this data for any purpose contrary to the subjects' applicable signed informed consent document(s).
6. I agree to return or properly dispose of this data at the conclusion of my work and to inform the distributing agent of this disposal in a timely manner.

My signature indicates my agreement to abide by these guidelines.

Signature: _____

Submit to Project PI