

RESEARCHER AGREEMENT¹

AGREEMENT

This agreement is made between _____ (name of researcher), referred to below as the researcher, and

Memorial University, referred to below as the University.

The researcher has requested access to the following records that contain Personal Information and are in the custody or under the control of the institution:

Describe records in detail here.

The researcher understands and promises to abide by the following terms and conditions:

1. The researcher will not use the information in the records for any purpose other than the following research purpose unless the researcher has the University's written authorization to do so:

Describe purposes in detail here.

2. The researcher will give access to Personal Information in a form in which the individual to whom it relates can be identified only to the following persons:

Identify persons with access here.

3. Before disclosing Personal Information to persons mentioned above, the researcher will enter into an agreement with those persons to ensure that they will not disclose it to any other person and will make a copy of each such agreement available to the University on request.

4. The researcher will keep the information in a physically secure location to which access is given only to the researcher and to the persons mentioned above.

5. The researcher will destroy all individual identifiers in the information by

_____ (date)

6. The researcher will not contact any individual to whom Personal Information relates directly or indirectly without the prior written authority of the institution.

7. The researcher will ensure that no Personal Information will be used or disclosed in a form in which the individual to whom it relates can be identified without the written authority of the University.

¹ This agreement template is based on a form specified in Ontario's Freedom of Information and Protection of Privacy Act. It has been reviewed for consistency with Section 41 of ATIPPA

8. The researcher will notify the University in writing immediately upon becoming aware that any of the conditions set out in this agreement have been breached.

Signed at _____ this _____ day of
_____, 20_____.

| Researcher | Representative of University |
|-------------------|-------------------------------------|
| Name: | Name: |
| Address: | Position: |
| Address: | Institution: |
| Telephone: | Telephone: |
| Signature | Signature: |