

## Genetic Data Access Use Agreement

This Data Access Use Agreement ("Agreement") permits the Individual User named below to obtain access to the datasets requested by the *Genetic Data Cross-Reference Request Form*. A separate agreement must be completed for each User.

In consideration of the HRS providing access to an HRS Genetic Dataset to the User, the Receiving Entity, on behalf of the User, agrees:

- 1. To make no attempt to identify the persons in this or other HRS datasets.
- 2. That if the identity of any person or establishment in this file is inadvertently discovered, then (a) no use will be made of this knowledge, (b) the Director of HRS will be advised of this incident immediately, (c) the information that would identify any individual or establishment will be safeguarded or destroyed, as requested by HRS, and (d) no one else will be informed of the discovered identity.
- 3. To employ the following guidelines when producing tabulations for distribution:
  - Magnitude Data: Ensure that no cells/strata with **n < 5** are produced.
  - Frequency Data: Apply a marginal threshold of  $n \ge 5$  and cell threshold of  $n \ge 5$  to all tabulations.
  - Protecting against complementary disclosure: Additional cells may be suppressed, i.e., complementary disclosure, to make sure the primary suppressions cannot be derived by subtraction from published marginal totals.
- 4. To publish only aggregate statistical summaries of the data and analyses (frequency tabulations, magnitude tabulations, means, variances, regression coefficients, and correlation coefficients), subject to the provisions above.
- 5. To cite HRS as the data source in any publications or research based upon these data, and to provide a copy of any publications to the HRS. The following citation should be included in any research reports, papers, or publications based on these data:
  - In text: "The Health and Retirement Study genetic data is sponsored by the National Institute on Aging (grant numbers U01AG009740, RC2AG036495, and RC4AG039029) and was conducted by the University of Michigan."
  - In references: "Health and Retirement Study. Produced and distributed by the University of Michigan with funding from the National Institute on Aging (grant numbers U01AG009740, RC2AG036495, and RC4AG039029), Ann Arbor, MI."
- 6. To store and use this data set (and any data sets derived from it) in a secure computing environment.
- 7. To the extent permitted by law, to hold harmless and indemnify the University of Michigan, its agents and employees, for any claims of breaches of confidentiality arising out of the User/Receiving Entity's use of the data provided under this Agreement including failure to abide by any section of this Agreement or any accidental or intentional violation of privacy of any contributor to any HRS data resource.
- 8. To use the cross-reference file to link HRS genetic data with HRS publicly available data solely for statistical reporting and analysis.
- 9. Not to share the cross-reference file with, or provide copies of this file to, any other person or organization. Note: Each research assistant/associate, graduate student or undergraduate student, or other individual working on the research project must sign and submit a separate form.
- 10. To return or destroy the cross-reference file, and any derivative data files, upon request from HRS.
- 11. To store and use this data set (and any data sets derived from it) in the secure computing environment defined by the associated approved dbGaP data protection plan or NIAGADS data access request.
- 12. The Receiving Entity Representative is a person authorized to enter into this contractual agreement on behalf of the Receiving Entity.

dbGaP or NIAGADS application and user agreemen	through this Agreement is contingent upon and subject to all the requirements of the approximate the transfer of the dbGaP or NIAGADS user agreement necessarily results in	the
	The Receiving Entity Representative may not be the same person as the User and/or Reque	
dbGaP Request #	dbGaP Approval Date	
NIAGADS Request #	NIAGADS Approval Date	
	PI Affiliation	
Project (Title)		
<b>USER</b> My signature certifies that I have read and ack the provisions of this agreement.	Receiving Entity Representative  nowledge	
Signature/Date	Signature/Date	
Typed Name	Typed Name	
Title	Title	
Institution	Institution	
Building Address	Building Address	
Street Address	Street Address	
City, State, Zip	City, State, Zip	
Phone	Phone	

Email

Include this completed agreement with your **Genetic Data Cross-Reference Request Form** submission.

HRS Data Download Login Email