

**SUPPLEMENTAL AGREEMENT WITH RESEARCH STAFF
FOR USE OF RESTRICTED DATA FROM THE
HEALTH AND RETIREMENT STUDY**

*Please note that you are to submit **one** original, signed copy of this document.*

The undersigned Research Staff, in consideration of their use of Restricted Data from the Health and Retirement Study, agree:

- a. That they have read the associated Agreement for Use of Restricted Data from the Health and Retirement Study, the Research Plan and Restricted Data Protection Plan incorporated by reference into it.
- b. That they are "Research Staff" within the meaning of the Agreement.
- c. To comply fully with the terms of that Agreement, including the Restricted Data Protection Plan incorporated by reference into it.

The undersigned Restricted Data Investigator agrees that the persons designated herein are Research Staff within the meaning of the associated Agreement for Use of Restricted Data from the Health and Retirement Study.

RESEARCH STAFF:

Signature Date

Typed name

Job title/formal affiliation with research project

Address

City, State, Zip

Email

Phone

RESEARCH STAFF:

Signature Date

Typed name

Job title/formal affiliation with research project

Address

City, State, Zip

Email

Phone

RESTRICTED DATA INVESTIGATOR:

Signature Date

Typed name

Title