**Data Sharing Agreement**

*(Use this form to formalize data sharing agreements in conjunction with IRB submissions. Complete sections highlighted in dark gray fillable fields. Delete this italicized red text before submission. Form adapted with permission from Oklahoma State University)*

**Project Title:** [Insert Title of Project]

**Researcher(s):** [Name of Researcher]

**Institutional Affiliation:** [Researcher Institutional Affiliation]

**Data Provider(s):**

**Institutional Affiliation:** [Data Holder Institutional Affiliation]

The Researcher(s) listed above has been granted access to previously collected data managed by the Data Holder listed above. The purpose of this agreement is to ensure the anonymity of participants whose data are included in the requested data set. This agreement is pursuant to IRB regulations set forth by the OHRP. The relevant text from the OHRP/IRB regulations is as follows:

*"the investigator(s) cannot readily ascertain the identity of the individual(s) to whom the coded private information or specimens pertain because the investigator(s) and the holder of the key enter into an agreement prohibiting the release of the key to the investigator(s) under any circumstances until the individuals are deceased."*

**For Data Provider:**

By signing below, I commit to excluding all personally identifying information associated with any data provided to Researcher(s). My signature does not commit me to providing any data whatsoever to Researcher(s). Rather, if such data are provided, I agree that all personally identifying information will be excluded from the data set.

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Signature Date

**For Researcher(s):**

By signing below, I commit to using only data received from Data Provider completely disassociated from information that might personally identify any individual participants. I also agree to exclude Data Provider as an investigator on any research projects I undertake using the requested data.

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Signature Date

Revised July 23, 2021