

Social and Economic Survey Research Institute Data Request Form

Social and Economic Survey Research Institute (SESRI) Qatar
 University
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To request data¹ from the Social and Economic Survey Research Institute, Qatar University, please complete all parts of this application.
Incomplete applications will not be processed.

1. Applicant²/Investigator Information

Name	
Job Title	
Institution³	
Physical Address of Institution	
Mailing Address (if different from above)	
Email Address at your institution	

¹ *DATA* are the data files and materials provided by SESRI, any copies or backups of those files and materials, and any product (whether electronic, hard copy, or otherwise) derived from them.

² The *APPLICANT* is the individual who serves as the primary point of contact for all communications involving the application and any resulting agreement. The applicant must hold a permanent appointment at his/her institution and assumes all responsibility for compliance with all terms of any resulting agreement.

³ The *INSTITUTION* is the organization employing the *APPLICANT*.

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1. Applicant/ Investigator Information

Second Email Address Gmail, Hotmail or others	
Landline Telephone number at your Institution (please include country code if outside Qatar)	
Mobile number (please include country code if outside Qatar)	
Fax number at your institution (please include country code if outside Qatar)	

2. Requested Data

Name of Survey(s) and the year(s)	
List of Variables	
Any Other Specifications or descriptions you would like to provide	
Desired format for data: SPSS, Stata, SAS.	

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3. Use of Requested Data:

<p>The purpose of the data requested</p>	<p> <input type="checkbox"/> classroom teaching <input type="checkbox"/> student research project associated with grant <input type="checkbox"/> student research associated with class <input type="checkbox"/> personal research <input type="checkbox"/> other, please describe in detail _____ </p>
<p>Who will this data be shared with? PLEASE NOTE THAT EVERY PERSON LISTED HERE MUST BE A SIGNATORY TO THIS AGREEMENT</p>	<p>1. Co-investigators: Please list names, titles, and contacts of all co- investigators who will have access to the data</p> <p>2. Any other party: Please give names, titles, contacts, and reasons for sharing requested data with any other party</p>
<p>What is your substantive area of expertise?</p>	

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4. AGREEMENT:

By signing below, you agree and commit to the following:

1. The Investigator (applicant) shall ensure that only Permitted Users (i.e. the users declared and approved in this form, including the Investigator) may access the data and that data will be used solely for scientific and public policy research, and not for any administrative or law enforcement purpose.
2. The Investigator (applicant) shall supervise the use of the data by Permitted Users' to ensure that their use of data conforms to all articles listed in this agreement.
3. The Investigator (applicant) shall maintain physical control of the data at all times and shall ensure that each Permitted User follows the security precautions set forth in this agreement
4. Each Permitted User shall use the data to generate only statistical summary information that does not permit the identification, either directly or inferentially, of any individual person, family, or household.
5. Each Permitted User shall not make any attempt to identify any individual person, family, household, or employer. If any Permitted User inadvertently identifies an individual person, family, household, or employer or discovers a technique for doing so, the Permitted User shall promptly report the identification or discovery to SESRI but shall not reveal it to any other person who is not a Permitted User under this Agreement.
6. In any presentations or publications, Investigators (applicant) and Research Staff will use only statistical information that does not permit the identification of any individual person, family, household, or employer.
7. The Investigator (applicant) and Research Staff agree to exclude from any type of publication or presentation the listing and description of individual cases, as well as data or quotations from individual cases.
8. The Investigator (applicant) and Research Staff will not present the results of any analysis that could potentially identify respondents, either directly or indirectly.
9. Only aggregate statistical data may be distributed.
10. Cell sizes, marginal data, and strata must be of sufficient size to avoid disclosure.
11. The Investigator will ensure that the data will be stored securely (including electronic files, printouts, notes, removable storage devices, portable media, and backups) and will be transmitted between authorized users in a secure manner (this does not include email or internet transfer)
12. Each Permitted User, individually or through the Investigator, shall submit to SESRI copies of all publications that make use of the data.
13. Any publication that makes use of the data must acknowledge SESRI, and its funders, as appropriate, as the source of the data. Changes to this Agreement require prior written SESRI approval and are at SESRI' sole discretion.
14. Nobody can be added to this agreement without the pre-approval of SESRI.

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Name of applicant (in print) _____

Signature _____

Date _____

Institution must sign off:

Dean of Collage/ Faculty Head/ student's Professor/ Department Head or Supervisor at work (in print)

Signature _____

Date _____

Email address at your Institution _____

Landline Telephone number at your Institution _____

If Applicable:

Name of other party who the data will be shared with (in print) _____

Signature _____

Date _____

Email address at your Institution _____

Landline Telephone number at your Institution _____

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If Applicable:

Name of other party who the data will be shared with (in print) _____

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Signature _____

Date _____

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FOR SESRI USE ONLY

REQUEST PROCESSING SHEET

Application Received by:	<input type="checkbox"/> SESRI email <input type="checkbox"/> other email, specify _____ <input type="checkbox"/> fax <input type="checkbox"/> scanned <input type="checkbox"/> in-person <input type="checkbox"/> other, specify _____
Review by Head of Research	Recommendation: Signature and date:
Approval by Director	Signature and date:
Response delivered to Applicant	Date By
Data set Prepared by:	SESRI staff member:
Data set Reviewed by:	SESRI staff member:
Data Delivered	Date and Mode:
Data Stored	Location: