

# Data Access Application Amendment Form

## AMENDMENTS REQUESTED

*This form is to be used when data access for a project has been fully approved; only changes to the data access period and project personnel are permitted.*

Amendment Type	Select Amendment Type(s) (✓)	Instructions
EXTEND DATA ACCESS PERIOD		Complete " <b>DAC AMENDMENT –ACCESS PERIOD</b> " page.
RESEARCH PERSONNEL		Complete applicable " <b>DAC AMENDMENT – RESEARCH TEAM</b> " pages.

The **Principal Investigator** must review the amendment details and sign the declaration below.

## DATA ACCESS REFERENCE INFORMATION *(please complete)*

<b>Project Title</b>	
<b>Data Access Reference ID</b>	
<b>Principal Investigator</b>	

## PRINCIPAL INVESTIGATOR DECLARATION

I confirm that the information provided in this amendment is accurate and timely to the best of my knowledge.

Signature	Name
	Date



# DAC AMENDMENT – ACCESS PERIOD

Extension to the Data Access Period

## DATA ACCESS PERIOD

ORIGINAL DATA ACCESS END DATE	
NEW DATA ACCESS END DATE	

## JUSTIFICATION FOR CHANGE

*Please explain why an extension to the data access period is required.*



# DAC AMENDMENT – RESEARCH TEAM

Changes to Project Team

**Instructions:** Please complete the “CHANGE IN PERSONNEL” table as per the example below.

Scenario	Original Team Member (if applicable)	New Team Member (if applicable)	Justification
Add a new team member.		*New team member	“Added in order to...”
Swap a team member.	*Original team member	*New team member	“Swapped because...”
Remove a team member	*Original team member		“Removed due to...”

CHANGE IN PERSONNEL		
Original Team Member (if applicable)	New Team Member (if applicable)	Justification

Please have each new team member complete and sign a **New Team Member Details & Disclosure** and **Student/Research Assistant Supervisor/Manager Declaration** (if applicable).



# DAC AMENDMENT – RESEARCH TEAM

Team Member Details & Disclosure *(complete for each team member)*

Project role	
Brief biography, role description & justification <i>(a URL link or attached biography/academic CV is acceptable)</i>	
Family name	First name
University/institution	Department/section
Work phone	Mobile
Email	
Mailing address	

<b>Please tick if you require access to the data set(s)</b>	
<b>Protecting the Principles of the Data Access Protocol</b>	
Each team member named in this application must read, understand and agree to uphold the principles of the <b>Data Access Protocol</b> . Failure to adhere to the <b>Data Access Protocol</b> may result in data access being terminated for this project and all other projects I am named.	
Please signal your understanding and acceptance of these principles by checking this box.	
Please confirm you have attended a relevant data workshop or familiarised yourself with the workshop materials and technical documents (data dictionaries and data user guides) by checking this box.	
<b>Are you a student or research assistant?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>If you selected "Yes" above, please sign the <b>Declaration</b> below and complete the <b>Student &amp; Research Assistant Declaration</b>.</i>	
<b>Declaration:</b> I declare that the information provided is timely and accurate to the best of my knowledge.	
Signature	Name
	Date



# DAC AMENDMENT – RESEARCH TEAM

Student/Research Assistant Supervisor/Manager Declaration (*complete for each research assistant/student*)

If you are a <b>student or research assistant</b> please fill in, and have your supervisor/manager sign off, the form fields below.	
Student/research assistant name ("the Team Member")	
Name of student supervisor/manager ("the Supervisor")	Supervisor/manager role and title
Telephone	Mailing address
Email	
<b>Supervisor/Managers Declaration</b>  I, the Supervisor declare that I accept all responsibility for the conduct of the Team Member. If the Team Member breaches the principles of the <b>Data Access Protocol</b> , I understand that my access to <i>Growing Up in New Zealand</i> data for any current and future research projects will be reviewed and may be terminated.	
Signature	Name
	Date