

# **Application to access NESA data & information**

## **Applicant details**

Name of person(s) applying for access to data/information

University/institute or research organisation supporting the research (if applicable)

Email

Telephone

Address for correspondence

#### **Project details**

Project description and purpose for requesting the information

Details of data and/or information requested from NESA (provide as much detail as possible)

### **Declaration**

I, ....., agree that I will:

- take appropriate action to ensure the privacy and security of all information and data obtained or created as part of the research project, and not share the data outside my immediate research team, and
- use the data/information provided only for the purposes I have identified, and
- not attempt to re-identify any persons, schools or educational sectors in de-identified data provided by NESA, and
- use a Commonwealth accredited integrating authority (eg, the Centre for Health Record Linkage) for a data linkage project, and
- ensure the anonymity and confidentiality of individual persons, schools and educational sectors in reported findings, and
- not cause any act or allow any omission which may constitute a breach of section 18A of the *Education Act 1990* (NSW), and
- notify NESA of any substantial changes to the timing, scope, methodology or any other significant aspect of the project, and
- acknowledge the provision of data/information by NESA, but not imply that NESA endorses the project, and
- provide NESA with any potential publications before submission to a journal, magazine or media, and
- provide NESA a report of the research findings at the conclusion of the research

I furthermore acknowledge that breaches of this arrangement by myself and/or my research team may be subject to sanctions and/or legal proceedings.

Signature: .....

I acknowledge that this application may incur a fee to cover search, retrieval and provision of data and other information, and that NESA will advise me of any such fee that may apply.

I declare the above information to be true and correct.

Signature:....

Date: / /

#### Sending your application

Email your application to research@nesa.nsw.edu.au