

D A T A S E T R E Q U E S T

PURPOSE OF THIS FORM

This form is to be used to request a copy of a New Mexico YRRS dataset. The form requires: 1) a description of the analysis to be carried out and of the manner in which the results will be reported, and 2) a signature from the data user making the request agreeing to specific data use and reporting restrictions.

1 Dataset requested (2001, 2003, 2005, 2007, 2009; CDC state level sample or NM local area sample):

2 Please include a brief description of the analysis you will perform, how you will report results, and the software package you will use for analysis.

3 Data use and reporting restrictions

- a.** Data users cannot redistribute the dataset to other users. All potential users of the dataset must complete a dataset request form and return it to the Epidemiology and Response Division (ERD), NM Department of Health.
- b.** Data analysis and reporting cannot be conducted at the school level. School district level analysis and reporting can be conducted only with express permission of the appropriate school district superintendent. A form requesting this permission from the school district superintendents is available from Dan Green, ERD, NM DOH (contact information below).
- c.** Data analysis must be conducted using weights (see codebook) with a software program (i.e., STATA or SUDAAN) that can take into account the complex survey design.

I agree to conform to the data use and reporting restrictions outlined above.

Signature: _____

Printed Name: _____

Agency: _____

Address: _____

Phone: _____

Email: _____

Return form to by fax or email to:

Dan Green ■ Social Indicator Epidemiologist

Epidemiology and Response Division, New Mexico Department of Health

1190 St. Francis Dr. N1311 • PO Box 26110 • Santa Fe, NM 87502-6110

Phone: (505)476-1779 • Fax: (505)827-0013 • Email: Dan.Green@doh.state.nm.us

SCHOOL DISTRICT LEVEL INFORMATION RELEASE REQUEST

PURPOSE OF THIS FORM

This information release form is to be used by school district superintendents to request that school district level results from the New Mexico Youth Risk and Resiliency Survey be released for use at the local level for the purposes of prevention and health promotion efforts. Information obtained through the use of this form may not be released to the general public or the media without express permission of the appropriate school district superintendent.

1 Superintendent authorizing release of information.

Name: _____ Address: _____
Position: _____
Phone: _____
Email: _____

2 Person to whom information is to be released.

Name: _____ Address: _____
Position: _____
Phone: _____
Email: _____

3 Description of information to be released. (Indicate "Complete school district report" and/or provide description of special tables requested.)

Complete school district report

Topics of interest: _____

5 How will information be used (grant writing, design of intervention, etc.)?

I agree to conform to the data use and reporting restrictions outlined above.

School District Superintendent Signature: _____

Date: _____

Return form to by fax or email to:

Dan Green ■ Social Indicator Epidemiologist

Epidemiology and Response Division, New Mexico Department of Health

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