

**Spring Branch Independent School District**  
**Access to Confidential Data**  
**SBISD Staff/ Non-SBISD Client Agreement**  
*(Please sign and return with the Application for Research)*

Director of Research Project: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: Work: \_\_\_\_\_ Home: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Justifications:           Educational Research          

I understand that any unauthorized disclosure of confidential information is illegal as provided in the federal Family Educational Rights and Privacy Act of 1974 (FERPA), 20 U.S.C. 1232 *eg. seq.* and in the implementing federal regulations found in 34 CFR Part 99. FERPA is specifically incorporated into the Texas Public Information Act (formerly known as the Open Records Act). It is listed as an exception to records that are subject to disclosure to the public.

In addition, I understand that any data, datasets or output reports that I, or any authorized representative, are confidential and the data are to be protected. I will not distribute to any unauthorized person any data or reports that I have access to or may generate using confidential data.

I hereby agree that failure to abide by the requirements of this client agreement may lead to the immediate revocation of any research study that I may be performing for SBISD. I understand that any intentional, knowing, or negligent release of confidential student information to unauthorized persons may also subject me to a legal cause of action for violation of an individual's civil rights in addition to state or federal criminal penalties.

\_\_\_\_\_  
Director of Research Project's Signature Date

\_\_\_\_\_  
Faculty or Staff Sponsor of Research Project's Signature Date