# **Application form for accessing micro data files**

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| **Section 1 - Organization/Research institution** |

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| Name: | Address: | Country: |

**Representative of Organization/Research institution:**

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| Title: | First name: | Last name: |
| Position: | E-mail: | Telephone number: |

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| **Section 2 – Data users** |

**Please identify all persons who will work with the data.**

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| Title: | Name Surname: | Identification number: |
| Institution (university, institute): | Institution address: | Position: |
| E-mail: | Telephone number: | Contact person:  *Yes No* |

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| --- | --- | --- |
| Title: | Name Surname: | Identification number: |
| Institution (university, institute): | Institution address: | Position: |
| E-mail: | Telephone number: | Contact person:  *Yes No* |

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| Title: | Name Surname: | Identification number: |
| Institution (university, institute): | Institution address: | Position: |
| E-mail: | Telephone number: | Contact person:  *Yes No* |

**If you are applying for study purposes (at the Ph.D level or above), please identify the lead lecturer, and you must attach to this application form and proof that you are a student at the Ph.D level or above from the Educational Institution.**

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| Topic: | E-mail of the leader: | Telephone number of the leader: | Firm of the leader: |

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| **Section 3 - Project description** |

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| 1. Project title: |
| 1. Project framework (multiple responses possible):   Ph.D thesis or higher level of study  Research project  Other project framework: |
| 1. What will be studied in the framework of this project: |
| 1. Do you have similar studies or projects related to this subject   before?  *Yes No*  4.1 If so, please describe: |
| 1. Why is access to microdata necessary for this project? (Explain why aggregated data cannot be used) |
| 1. Is there any other source of data on the proposed search? *Yes* *No*   6.1 If so, why are you requesting microdata? |
| 1. Which of the following units will be required for the project:   PersonsHouseholds  Enterprises  Other: |
| 1. Please indicate the lowest regional level in which the results should be provided:   National Prefectures  Municipalities  Other: |
| 1. What statistical methods will be used: |
| 1. Specify the length of time for which you are requesting access to the microdata   From (month/year): To (month/year): |
| 1. List the results of the result / results (such as reports, articles, books, etc.) and the target audience for the proposed results   Results Auditor: |

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| **Section 4: Required data** |

• The application is valid for a statistical activity

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| *Microdata* | *Reference period* |
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| Where you want to access the data?  In the safe room at INSTAT SIMONA |
| Favorite software for analyzing data in safe room:  SPSS SAS  R Other  Additional information regarding the software (such as the version number): |

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| **Section 5 – Additional notes/comments** |

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**Section 6: Declarative Clause**

I, the undersigned aware of the criminal responsibilities arising from the declaration and presentation of data of false circumstances, under my personal responsibility declare that the data presented in this form are true and in compliance with law no. 9887 “On the protection of personal data”, I voluntarily authorize the institution to process and use my personal data for statistical and application review purposes.

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| **Section 7 – Applicant's signature** |

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| Signature: |  | Date: |
| Signature: |  | Date: |
| Signature: |  | Date: |