

**For and on behalf of User\* and User Institution:**

**Institutional or Administrative Authority\*\***

**\*\* The Institutional or Administrative Authority is equivalent to the individual with the organizational authority to sign for a grant application, otherwise known as the Authorized Organizational Representative (AOR) or the Signing Official. The Institutional or Administrative Authority has authority to and does bind the User Institution to this AGREEMENT FOR ACCESS AND/OR DOWNLOAD OF CONTROLLED-ACCESS GENOMIC SEQUENCING DATA.**

**Signature:** \_\_\_\_\_

**Print name:** \_\_\_\_\_

**Job title:** \_\_\_\_\_

**Institution:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Telephone  
Number:** \_\_\_\_\_

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

**Date:** \_\_\_\_\_