**[Requesting Institution Name]** **[Department/Laboratory]** **[Address]** **[City, State, Zip Code]** **[Phone Number]** **[Institutional Email]**

[Date]

To  
 CISAM-EHR Project Coordination  
 [Institution Responsible for CISAM-EHR]  
 [Address or Contact Email]

**Subject: Request for Access to the CISAM-EHR Dataset for Academic Purposes**

Dear Sir/Madam,

I hereby request access to the **CISAM-EHR dataset**, developed as described in the article entitled “[Title of the Paper]”, approved by the Brazilian National Research Ethics Committee under process number **CAAE 12345678.9.0000.0000**.

On behalf of the research team affiliated with [Requesting Institution], I declare that the dataset will be used **exclusively for academic and research purposes**, with no commercial use or distribution to unauthorized third parties. We commit to the following:

1. The dataset will be used only within the scope of the research project entitled “[Project Title]”, under the responsibility of [Full Name of the Principal Investigator].
2. **All data will be handled confidentially and anonymously**, in full compliance with current legislation and ethical guidelines for sensitive data usage.
3. **No attempt will be made to re-identify** any individuals in the medical records.
4. **All copies of the dataset will be deleted from our storage systems within two (2) years** from the date of receipt or immediately upon request by the CISAM-EHR coordination team.
5. Any research output (e.g., articles, theses, dissertations) will **include proper citation and acknowledgment** of CISAM-EHR as the source of the data, following the citation guidelines provided.

Attached to this request, we provide:

* A copy of the approved research project;
* A signed responsibility statement from the principal investigator;
* Contact information for formal communication.

We appreciate your attention and remain available for any further clarification.

Sincerely,

**[Full Name of the Applicant]** [Position or Institutional Affiliation]  
 [Digital or handwritten signature, if required]  
 [Institutional email and phone number]