MENNINGER FOUNDATION ARCHIVES
RESEARCHER AGREEMENT

Part I. COPYRIGHT. The Menninger Foundation transferred, conveyed, warranted, and gave all existing and future copyrights it owned to the Kansas State Historical Society (KSHS) when it transferred ownership of its Archives to KSHS. This does not mean Menninger owned copyright to every document in the Menninger Foundation Archives. KSHS has not determined copyright status for all materials in the Menninger Foundation Archives. KSHS staff will provide information and assistance if possible, but it is the researcher’s responsibility to determine the copyright status of the materials and secure copyright permission if necessary.

Part II. CONFIDENTIALITY. The records of the Menninger Foundation Archives sometimes contain individually identifiable health and other confidential information. The KSHS staff has made every reasonable attempt to identify these records but has not processed this collection below the folder level. Consequently records that contain confidential or individually identifiable material may unknowingly exist in folders not marked as restricted.

- As the researcher, I hereby acknowledge personal responsibility for respecting the privacy and confidentiality of access restricted records.
- I also agree not to use any privacy-protected information I may find in these records in a way that could be linked to a specific individual, living or dead.
- I will inform State Archives staff if I find confidential information not labeled as such.
- If I want to use records containing restricted information, I shall submit a request in writing to the Director, State Archives Division, Kansas State Historical Society, stating in detail the records to be used and reasons why I need access to them. I understand there is no guarantee that access will be granted.
- I understand that records in the Menninger Foundation Archives may contain Protected Health Information as defined in the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and that penalties may apply for violation of the Rule.
- I agree to assume all liability and hold the Kansas State Historical Society and its employees, volunteers, and affiliated individuals harmless in any use of these records.

By signing this, I affirm that I have read, fully understand, and will comply with all provisions of this Agreement.

Researcher name (printed): ________________________________________________________________

Researcher signature: ____________________________________________________________________

Card #:____________________________________  Date: _________________________________

KSHS representative: _____________________________________________________________________