

# Addendum to South Australian Data Sharing Agreement

This form incorporates additional information to be shared under an existing data sharing agreement.

**Reference number** for existing agreement:

**Title** of project/program/initiative in existing agreement:

**Date** lodged with ODA:

**Date** of final signature:

## 1. ADDITIONAL DATA REQUESTED

Provide details of the additional data you require for this project/program/initiative. Consider dates, geographic locations, age groups or agency-specific categories.

How is this additional data related to the original purpose of the project/program/initiative?

How will this additional data improve the existing project/program/initiative?

Specify the frequency of data transmission requested (e.g. one-off vs ongoing real-time).

☐ One-off. Specify when this will occur:

☐ Continuous/periodic sharing. Provide details of frequency: e.g. weekly.

Date of final transmission (if applicable)

Requests for additional data to an existing data sharing agreement must still meet the requirements of the Five Safes.

Will the sharing of this additional data be as per the original agreement? (e.g. no change to the Five Safes.)

☐ Yes ☐ No

If Yes, proceed to Signatures and Approval.

If No, please indicate the element that has changed from the original agreement:

☐ **Safe Projects.** Provide details of amendment:

☐ **Safe People.** Provide details of amendment:

☐ **Safe Data.** Provide details of amendment:

☐ **Safe Settings.** Provide details of amendment:

☐ **Safe Outputs.** Provide details of amendment:

## 2. SIGNATURES AND APPROVAL FOR ADDITIONAL DATA

Please ensure the signatories have appropriate delegation to authorise this request (e.g. data custodian, executive/Chief Executive or Minister).

1. Agency/Department/Organisation

Data Custodian

Phone number

Email	
Physical address	
Data recipient/data provider/both	
Signature	
Date	

2. Agency/Department/Organisation	
Data Custodian	
Phone number	
Email	
Physical address	
Data recipient/data provider/both	
Signature	
Date	

3. Agency/Department/Organisation	
Data Custodian	
Phone number	
Email	
Physical address	
Data recipient/data provider/both	
Signature	
Date	

Minister (if required*)	Hon Andrea Michaels MP Minister for Consumer and Business Affairs
Delegate (if required*)	Peter Worthington-Eyre Chief Data Officer, Department of the Premier and Cabinet
Signature	
Date	

\* Ministerial approval is required for addendums to data sharing agreements between one or more South Australian government agencies and one or more non-government organisations under the *Public Sector (Data Sharing) Act 2016*.