



40 Avon Street
Keene, New Hampshire 03431
603.283.2183

AGREEMENT FOR THE PROCEDURAL USE OF THE INT-EXT ID MEASURE (INT-EXT)

- The INT-EXT ID MEASURE will only be used for my own research purposes.
- The entire scale will be used when administering the INT-EXT ID MEASURE.
- Individual items and/or subscales will not be used separately.
- Individual items and/or subscales will not be used or adapted for the development of other instruments.
- The INT-EXT ID MEASURE will be kept under secure conditions.
- The INT-EXT ID MEASURE will not be reproduced in any written materials (including dissertations, theses, appendixes to dissertations/theses, teaching/instructional handouts, workshop guides, manuscripts, etc.)
- The INT-EXT ID MEASURE will not be shared with other interested parties who need to be referred to the author if they wish to use the instrument.

I understand and agree to the terms stated above. In addition, I understand and agree that a \$100.00 user fee entitles me to make unlimited copies of the INT-EXT ID MEASURE for one year from the date below, for one study only.

Signature: _____ Date: _____

Name (please print): _____

Address: _____

City, State, Zip: _____

Research Topic Title: _____

Planned use of the INT-EXT ID MEASURE: _____
(e.g., Dissertation, Survey of mental health trainees/clinicians, etc.)

Contact Phone Number: _____

Email Address: _____

If Student, Research Supervisor's Name: _____

School Name: _____

Signature of Supervisor: _____

Note: Please mail the contract and payment to Gargi Roysircar at the above address. Please make sure that the check is made out to Gargi Roysircar (not Antioch).