**Institutional Review Board 🟅 Southwestern Assemblies of God University**

**Confidentiality Agreement**

Revised September 2017

[Double click each field to add the requested information.]

I, researcher or technical expert , agree to maintain full confidentiality with regard to any and all information received from name of Principal Investigator related to his/her research of the researcher study entitled state title. Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be revealed (intentionally or inadvertently) during my role in this study.

2. To not make copies of any source of research data (e.g., questionnaires, audiotape recordings), unless specifically requested to do so by the researcher.

3. To store all study-related data sources and personal identifiers in a safe, secure location as long as they are in my possession.

4. To return to the researcher (named above) the products of my data collection and/or data analysis in a complete and timely manner.

5. To delete all electronic files containing study-related documents from my computer’s hard drive and all back-up devices.

I am aware that I can be held legally responsible for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose identifiable information contained in the data sources to which I will have access.

Full legal printed name of the researcher/technical expert: full name

Signature of the researcher/technical expert: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: date of signature