APPENDIX G-ii: ISERC CONFIDENTIALITY FORM – *Other Researchers*

This confidentiality form is a legal agreement between AIU's ISERC and the undersigned *other researchers* who will have access to individually-identifiable original records (electronic or paper), or any other matters regarding the research process.

ISERC Research Number: _____

Other Researcher's Name:_____ Date: _____

Title of Research_____

In conducting this research project, I agree to the following:

1. Keep all the research information shared with me confidential by not discussing or sharing the research information in any form or format.
2. Keep all research information in any form or format securely maintained on a daily basis, during the process of conducting and writing the research.
3. At the conclusion of the research, dispose of any documents that contain identification information, such as participant names or other information that could reveal identity of the human subject; as approved by the principal investigator

Any violation of this agreement would constitute a serious breach of ethical standards, and I pledge not to do so.

Other Researcher:

_____	_____	_____
Print Name	Signature	Date

_____	_____	_____
Witness Name	Signature	Date

This study has been reviewed and approved for human subject participation by AIU ISERC. If you have questions or concerns about this study, please contact the principal investigator. If you have questions regarding the participant's rights, contact the ISERC Office at 0743513617.