	UP OPEN UNIVERSITY		
	Institutional Research Ethics Committee		
	CONFIDENTIALITY AGREEMENT	REC Form No.	1 (C)
	(FOR MEMBERS, OBSERVERS	Version No:	01
	OR GUESTS OF THE NATIONAL	Date of Effectivity:	
	ETHICS COMMITTEE)		

I sign this document as ______ of the Ethics Committee for Human Research and voluntarily agree not to disclose or reproduce any confidential information and/or research protocols under consideration during the course of my activities with the Committee, or anytime afterwards.

Confidentiality covers information or materials prepared by the investigators, and/or sponsors for the ethics committee review either in written or verbal forms. This information includes technical and scientific data, financial and personal information concerning wages, remunerations, salaries and benefits. I agree to return the related data or document to the office of EC after the completion of the activity.

In case I have to disclose the confidential information by court order, I will so inform the committee within two days after notification.

Signature _____

Name _____

Institutional Affiliation

Address _____

Noted

EC Chair

Date _____