

Statement of Confidentiality Research Assistants and Transcribers

Title of Research Study:	
Princip	pal Investigator:
An important part of conducting research is having respect for privacy and confidentiality. By providing your signature below, you are agreeing to respect all participants' rights to privacy as well as to the people and organizations that may be included in the information you collect. Such information may include surveys, questionnaires, interviews, audiotapes, videotapes, etc. You are hereby agreeing to respect people's right to confidentiality by not discussing the information collected with family, friends or the general public. The study and its participants are to be discussed only with the Principal Investigator(s), Co-Investigator(s) and/or others identified by the Investigator(s).	
By prov	iding your signature below, you agree to the following: I understand the importance of providing confidentiality and anonymity (if applicable) to all research participants.
	I understand that the research information collected may contain references to individuals or organizations within the community, other than the participant(s). I understand that this information is to be kept confidential.
	I understand that the research information collected is not to be discussed or communicated to anyone other than the Principal Investigator(s), Co-Investigator(s) and/or others identified by the Investigator(s).
	I understand that the data files (electronic and/or hard copy) are to be secured at all times (e.g. not left unattended) and will be returned to the Principal Investigator(s) when the transcription process is complete.
	When transcribing audio or videotapes, I will be the only one to hear/view the tapes and they will be stored in a secure location at all times.
I hereby agree to the above statements and promise to guarantee confidentiality and anonymity (if applicable) of the research participants and all information collected.	
Signature of Research Assistant/Transcriber:	
Date:	