APPENDIX A

Confidentiality Agreement

I, ______, acknowledge that I have received the following documents from the Howard University Office of Research Integrity:

I hereby commit to maintaining the utmost confidentiality of these documents and pledge to disclose this information solely to the designated individuals outlined below. Additionally, I undertake to safeguard these documents when they are not in active use by securely storing them.

I agree to return these documents undamaged to the Howard University Office of Regulatory Research Compliance on or before:

_____by_____o'clock.

Document Release

Government agency or Howard University Institutional Official permitting release of the documents:

Print name	Signature	Date	
Person receiving	g documents:		
Print name	Signature	Date	
Document Retu	'n		
A government ag	gency or Howard Univers	ity official receiving retu	urned documents:
Print name	Signature	Date	Time
Person returnin	g documents:		
Print name	Signature	Date	Time