**Subject: Access to confidential information from BALSAC**

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| **I, the undersigned,** |  |
| **Fonction** |  |
| **For the research project** |  |

Solemnly declare the following:

* I undertake to respect and protect the confidentiality of the information from BALSAC communicated to me;
* I undertake not to disclose, copy or use, in any manner, any confidential information from BALSAC other than for the purpose for which they were communicated to me;
* I agree to this, freely and without constraint. I declare that I have carefully read the content of this agreement and that I have obtained all answers to my questions on the subject.

**In witness whereof, I have signed this agreement**

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| **In** |  | | | | |
|  | (place) | | | | |
| **This** |  | **of** |  | **Year** |  |
|  | (day) |  | (month) |  | (Year) |

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|  |  |  |
| Name |  | Signature |
|  |  |  |
| Address |  | Phone |
|  |  |  |
|  |  | E-mail |
|  |  |  |
| Witness’name |  | Witness’ signature |