

**CONFIDENTIALITY AGREEMENT**

**Transcription Services**

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| Insert Project title here |

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, transcriptionist, agree to maintain full confidentiality in regards to any and all audiotapes and documentation received from [researcher’s name] related to [her/his] doctoral study on [title of study]. Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of audio-taped interviews, or in any associated documents;
2. To not make copies of any audiotapes or computerized files of the transcribed interview texts, unless specifically requested to do so by [researcher’s name];
3. To store all study-related audiotapes and materials in a safe, secure location as long as they are in my possession;
4. To return all audiotapes and study-related documents to [researcher’s name] in a complete and timely manner.
5. To delete all electronic files containing study-related documents from my computer hard drive and any backup devices.

I am aware that I can be held legally liable for any breach of this confidentiality agreement, and for any harm incurred by individuals if I disclose identifiable information contained in the audiotapes and/or files to which I will have access.

Transcriber’s name (printed)

Transcriber’s signature

Date