

## CONFIDENTIALITY AGREEMENT

I hereby agree to keep confidential all information discussed during the Focus Group in which I am participating in {location} on {date}, being conducted by Annapolis Professional Resources, Inc. on behalf of the USDA, Food and Nutrition Service. I understand that my comments will be kept confidential and used only for research purposes. My name will not be divulged in any report.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Participant

Annapolis Professional Resources, Inc. hereby agrees to keep confidential all information discussed during the Focus Group held in {location} on {date}, on behalf of the USDA, Food and Nutrition Service.

\_\_\_\_\_  
Signature of Authorized Personnel

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Authorized Personnel

{Name of Local Agency or Research Facility} hereby agrees to keep confidential all information discussed during the Focus Group held in {location} on {date}, on behalf of the USDA, Food and Nutrition Service, Supplemental Food Programs Division.

\_\_\_\_\_  
Signature of Authorized Personnel

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Authorized Personnel