

**APPENDIX 9                      Sample Confidentiality Agreement**

**CONFIDENTIALITY AGREEMENT**

I hereby agree to keep confidential all information discussed during the Interview/Focus Group in which I am participating in (location, date, time) being conducted by (name of contractor performing service) on behalf of the USDA, Center for Nutrition Policy and Promotion.

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

\_\_\_\_\_  
Date

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

(name of contractor performing service) hereby agrees to keep confidential all information discussed during the (Interview/Focus Group) held in (location, date, time) on behalf of the USDA, Center for Nutrition Policy and Promotion.

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

\_\_\_\_\_  
Date

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

[RESEARCH FACILITY] hereby agrees to keep confidential all information discussed during the (Interview/Focus Group) held in (location, date, time) on behalf of the USDA, Center for Nutrition Policy and Promotion.

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

\_\_\_\_\_  
Date

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