

## **Basic Confidentiality Release Waiver for Academic Research**

This Confidentiality Release Waiver ("Waiver") is entered into by the undersigned participant in connection with his/her voluntary participation in academic research conducted by the research team of \_\_\_\_\_ ("Researcher(s)").

### **1. Confidentiality Commitment**

I understand that all information revealed during the course of this research project, including personal data and responses, will be treated as confidential by the Researcher(s). I acknowledge that my identity will not be revealed in any reports, publications, or presentations resulting from this research unless I expressly agree otherwise.

### **2. Consent to Data Collection**

I voluntarily agree to provide information for the purposes of academic research. I grant permission to the Researcher(s) to collect, analyze, and report the data I provide, in accordance with applicable ethical standards and privacy regulations.

### **3. Limited Release of Confidentiality**

I understand that confidentiality may be breached only if required by law or in instances where disclosure is necessary to prevent harm.

### **4. Voluntary Participation and Withdrawal**

My participation in this study is voluntary. I understand that I may withdraw my consent at any time, without any penalty or loss of benefits to which I am otherwise entitled.

### **5. Acceptance**

By signing this Waiver, I acknowledge that I have read, understand, and agree to the terms stated above.

Participant Name:

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_