

Name of Student			
Student Number		Programme:	
School/Institute			
Name of Supervisor/s (Please list all known)			
Topic of Research:			

During the course of your research project at the University, it is possible that you may contribute to the generation of intellectual property (in the form of, for example, patentable ideas, design rights, copyright, including copyright in computer code, know-how etc.) or receive information in confidence. The agreement below is to be signed where you need to keep such information confidential as set down in the University's [Policy on Ownership, Protection and Exploitation of Intellectual Property for Students](#).

SECTION A – To be completed by a member of the SUPERVISORY TEAM

1. Does the Research Project require the Research Student to sign the Confidentiality Agreement below? <i>(Please note that the Faculty of Medical Sciences requires all research students to sign the Confidentiality Agreement.)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, the Research Student should read the text below in Section B and sign where indicated.	
2. Is the thesis likely to contain potentially sensitive material and require an extended restriction (beyond the normal 6-month restriction period) when complete?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, the Graduate School will add a 'commercially sensitive' tag to the student's electronic record, which will indicate that examination of the thesis is to be performed under agreement of confidentiality and extended restriction is to be the default on submission of thesis and award of degree.	
Supervisor Signature	Date

SECTION B – To be completed by the Research Student

Accordingly, I hereby agree to:

Keep secret any information which is given to me, and which is identified (either verbally, or by appropriate mark), as confidential to either the University, or to a research sponsor. (Should an external research sponsor ask me to personally sign a confidentiality agreement I shall first present the document for scrutiny by my Supervisor, or other officer of the University. If in doubt, I shall contact the University's Research and Enterprise Services, Intellectual Property and Legal Services Team).

Seek comment from my Supervisor/s prior to making any publication relating to my research project and accept the decision of my Supervisor/s should I be requested to remove any of the content which may either breach an obligation of confidentiality to a third party or compromise the ability of the University to subsequently seek patent protection.

In the event of a disagreement between my Supervisor/s and myself over confidentiality as applies to a proposed publication, I agree to refer the matter to the relevant Dean of Postgraduate Studies for resolution.

Student Signature: _____ Date: _____