DEPARTMENT OF HEALTH AND HUMAN SERVICES
FOOD AND DRUG ADMINISTRATION

COMMITMENT TO PROTECT NON-PUBLIC INFORMATION
EMPLOYEE AGREEMENT

Whereas access to non-public information from the files of the Food and Drug Administration (FDA) is required in the performance of my official duties, under Contract Number _____ between FDA and my employer _____

_____

I, on this _____ day of _____ , 20 hereby agree that I shall not further release, publish or disclose such information and that I shall protect such information in accordance with the provisions of 21 U.S.C. 331(j), 21 U.S.C. 360j(c), 18 U.S.C. 1905 and other pertinent laws and regulations governing the confidentiality of non-public information.

I understand the provisions of 21 U.S.C. 331(j), 21 U.S.C. 360j(c), 18 U.S.C. 1905 and that I am subject to criminal penalties prescribed by law for any violation(s) thereof.

Signature: _____ Date: _____

Type or Print Name: _____

Witnessed by: _____ Date: _____

Type or Print Name: _____

DESCRIPTION OF INFORMATION RELEASED:

PSC Graphics (301) 443-1090 EF