Form 31.1 Request to Access ERC Files

**Eastern Visayas Health Research and Development Consortium - Ethics Review Committee**

***REQUEST TO ACCESS ERC FILES***

I, (Name, Surname) as a non-member of the **Eastern Visayas Health Research and Development Consortium -** **Ethics Review Committee**, understand that the documents I am given access to by the **Eastern Visayas Health Research and Development Consortium -** **Ethics Review Committee** are confidential. I shall use the information only for the purpose indicated in this form and shall not duplicate, give or distribute these documents to any person(s) without permission from the **Eastern Visayas Health Research and Development Consortium -** **Ethics Review Committee**. Upon signing this form, I agree to take reasonable measures and full responsibility to keep the information as Confidential.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Signature

\_\_\_\_\_\_\_\_\_\_

Date