

## **University Non-Disclosure Agreement**

Please note that \_\_\_\_\_(university's name)\_\_\_\_\_is authorized to sign the consent form on behalf of involved interviewees and stakeholders. By signing the Agreement, the university is obliged to inform the interviewees and stakeholders their binding conditions therein; and that all conditions are agreeable by the interviewees.

It is agreed as follows:

## 1. Confidential Information

Confidential Information shall include all oral and written communication between the AUN-QA assessors and interviewees during each interview session.

## 2. Obligations of Receiving Party

2.1 Receiving Party shall not do any form of recording including video, voice, and screen recording.

2.2 Receiving Party shall not take photos and screenshot during every interview session.2.3 Receiving Party shall not publish or disclose any confidential information to third parties via personal/organizational medium platforms.

<b>Disclosing Party</b>	
Signature	
Name	Date
<b>Receiving Party</b>	
Signature	
Name	
Position	_(Head of university's QA unit)
Date	