

The Association of Science and Technology Professionals of Alberta

Confidentiality Agreement for Examination Development Activities

By signing my name below, I acknowledge that I have accepted the opportunity to be a voluntary Participant in the review process of competency assessment materials, for the general benefit of science and technology professionals, and that as a result I have or will be given access to information and/or materials that are confidential.

I agree that I will not share or communicate any such confidential information, or any materials containing such information with any other parties, and I will also not use any such confidential information for my own personal benefit, or for any purpose that competes with the activities of ASET, without the express consent of ASET to do so.

I understand that these provisions apply before, during, and, after examination development activities (including item-writing session, item-revision session, exam committee meeting).

Participant's Name:

_____ (please print)

Participant's Signature:

Date: _____

Witness' Signature:

Date: _____