

PRC Server Account Signatory Page

Signatures:

I am responsible for protecting the confidentiality of the information pertaining to any School of Pharmacy, UM Contract. Unauthorized use or disclosure is subject to legal penalties. By signing, I acknowledge that I have reviewed and will abide by the Good Research and Data Security Practices outlined by PHSR.

Account Holder Signature

Date

Principal Investigator Signature

Date

PRC Authorizing Signature

DatePRC