



UNIVERSITY OF
WATERLOO

Department of Mechanical
and Mechatronics Engineering

WORK REPORT CONFIDENTIALITY AGREEMENT **FORM 1**

EMPLOYER REQUEST:

Date: _____

The employer considers the information in the following work report to be sensitive or proprietary and requests that the University of Waterloo treat the report as CONFIDENTIAL.

Employer: _____

Address: _____

The employer requests that the report be evaluated, in confidence, by only one faculty member. The work report will be returned to the student once it has been marked.

Signed (student's supervisor): _____ Printed Name: _____

Title: _____ Phone Number: _____

REPORT & STUDENT DATA:

Work Report Title: _____

_____ Date on report: _____

Prepared by (student's name): _____ UW ID #: _____

UNIVERSITY CONFIDENTIALITY AGREEMENT:

The Mechanical & Mechatronics Engineering Department and the delegate responsible for grading the report agree to maintain the confidentiality of the above-named report for a period of not less than three years from the date of grading. No copies of the report will be made. The report will be read only by the delegate named below. A suitable delegate will be chosen solely on the basis of the report title. The report will be kept in a locked office until returned to the student.

Signed: _____ Date: _____

Name (please print): _____

MME Department Delegate

Department of Mechanical and Mechatronics Engineering

University of Waterloo, E5 3001

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