

Confidentiality Undertaking and Data Protection Statement signed by _____, Identity Card No. (_____) hereunder referred to as “The Student”.

Confidentiality Undertaking

1. It is understood that The Student during the course of work/placement will be attached with the Malta Medicines Authority from _____ to _____ and may receive or encounter or understand certain information that may be considered by the Malta Medicines Authority as confidential. The Student may participate in activities of the Malta Medicines Authority such as inspections where certain information that may be considered as confidential may also be received or encountered by The Student. To ensure the protection of such information The Student shall keep confidential and shall not use or disclose, attempt to use or disclose to any person or organisation any of the secrets, confidential, and technical information of the Malta Medicines Authority or any of its affiliated or associated or related companies, and/or stakeholders/customers which come to knowledge during the attachment with the Malta Medicines Authority.
2. The term “secrets, confidential, and technical information” extends to all knowledge and information relating to the trade, business, activities, operations, organisation, finances, processes, dealings, specifications, methods, designs, formulae, and technology of and concerning the Malta Medicines Authority and any of its affiliated or associated or related companies, and/or stakeholders/customers.
3. The Confidentiality Undertaking shall apply during and after the termination of the attachment without any time limit.
4. All records, whether in documentary form or otherwise, including, without limitation, document drawings, papers, reports, letters, private notes, computer disks or tapes, sound recordings, films and video recordings, concerning the Malta Medicines Authority and stakeholders/customers and all copies and extracts of them made or acquired by The Student during the attachment with the Malta Medicines Authority shall be used for the purposes of the work/placement and shall be the property of the Malta Medicines Authority and shall be destroyed once the agreed attachment by The Student to the Malta Medicines Authority is terminated.
5. If any part of this Undertaking is breached the attachment with the Malta Medicines Authority shall be immediately terminated and The Student shall be personally liable to refund any damages which the Malta Medicines Authority may suffer or in turn be liable to suffer as a result of such breach of the Undertaking.

Data Protection Statement

1. The Student hereby consents to the processing of their personal data by the Malta Medicines Authority and understands that this data shall be processed in accordance with the General Data Protection Regulation (GDPR), Regulation 2016/679/EU of the European Parliament and of the Council of 27 April 2016, the Data Protection Act (Chapter 586 of the Laws of Malta) and the Malta Medicines Authority [Data Protection Policy \(P-MA05\)](#). The latter outlines the rights of the data subject and the retention period for their personal data.

2. The Student also understands that the Malta Medicines Authority shall process this personal data in line with the purposes they are initially collected for. Exceptions to the latter include when the data subject consents to the new purpose, when there is a legal provision requiring or allowing the new processing or when the new purpose is deemed compatible with the purposes the personal data were initially collected for.

The Student acknowledges that the Confidentiality Undertaking and the Data Protection Statement has been read and understood and voluntarily accepts the duties and obligations set forth herein

Name: _____

ID / Passport Number: _____

Signature: _____

Date: _____