AGREEMENT GOVERNING USE OF COMPUTER INVESTIGATIONAL DRUG ACCOUNTABILITY SYSTEM AND USE OF MY ELECTRONIC SIGNATURE

Security and confidentiality is a matter of concern for all persons who have access to the Investigational Drug Accountability Computer System (known as Vestigo). Each person accessing the Investigational Drug Accountability System data and resources holds a position of trust relative to this information and must recognize the responsibilities entrusted in preserving the security and confidentiality of the systems and information.

As an authorized user of this system, I understand and agree that I am responsible for safeguarding my electronic signature password and computer-generated medical and study documents to prevent unauthorized use. I understand that the electronic signature (user ID and password combination) will be the legally binding equivalent of a traditional handwritten signature with all the ethical and legal implications thereof.

I affirm with my written signature that I have read, understand, and agree to fulfill the provisions of this Agreement.

SIGNED BY:	PRINT NAME:
DATE:	
STUDY NAME:	_
COMPANY (if applicable):	
TITLE:	
EMAIL:	
PHONE:	

Once you log in, please see our Vestigo Verify Help Center. It can be accessed by clicking link in the top right corner of your screen. Pop up blockers need to be OFF. Once you are on the Help Center, we recommend you search for "video" and watch "Videos for Monitors: How to use Verify".