

CONFIDENTIALITY AGREEMENT

Name of Local Council_____

City_____

Print Name _____

The protection of confidential information both past and present is vital and necessary to the interests and success of the **Name of Council**. Confidential information includes, but is not limited to the following examples:

- Client names and personal information
- Whether or not the client is receiving services
- All client file information
- All personal staff or volunteer personal information
- Donor names or information
- Financial information
- Computer programs, codes and data
- Other information and data communicated as confidential

Also, it is expected that volunteers will not initiate any council related communications with those served by the local council or their family members when encountered in public places nor acknowledge your familiarity with them.

This organization's confidentiality policy is compatible with and in accordance with all federal and state related statutes and other professional ethics and standards. If you are uncertain about whether information is confidential, check with your volunteer coordinator **before** discussing it with anyone. All volunteers are required to adhere to this policy. Improper use or disclosure of confidential information may result in disciplinary action, up to and including termination of volunteer status and/or appropriate legal action.

I acknowledge the Council's policy regarding confidentiality and agree to abide by and understand the consequences of improper use or disclosure of confidential information.

Date

Volunteer Signature

Date

Personnel Signature