Sample Non-Disclosure and Confidentiality Agreement

<Insert Agency Name>

During the course of visitation/ride-along with the <Insert Agency Name> you may be exposed to confidential criminal records and/or Michigan Secretary of State Records information. The confidentiality of this information is controlled by statute. The misuse of such information may adversely affect an individual’s civil rights and violates the law.

Misuse of the Michigan State Police Law Enforcement Information Network (LEIN) and its interfaced systems violates Michigan Compiled Law 28.214, Section 4 of the C.J.I.S. Policy Council Act. Misuse of the FBI National Crime Information Center (NCIC) is subject to additional federal criminal and/or civil penalties. Misuse of criminal history record information obtained through NCIC violates the Code of Federal Regulation, Title 28, Section 20.25. Misuse of Secretary of State (SOS) records violates State of Michigan driver and vehicle privacy protections laws [MCL 28.295a, 257.902, 257.903, 324.80130d, 324.80319a, 324.81120, 324.82160, and other provisions of law]. Misuse of motor vehicle records is subject to additional federal criminal and/or civil penalties.

Violation of this law, by you, as an observer of the procedures of the <Insert Agency Name>, may result in your being prosecuted in a criminal and/or civil action.

Participants may be exposed to privileged and confidential information and must agree not to discuss such information with anyone.

Participants shall respect and preserve the confidentiality of all names of persons and information learned through the visit/ride-along, unless otherwise authorized.

Participants shall not use department equipment, including computers, cameras, and recording equipment except when directly authorized by department staff or in extreme emergencies.

Under the requirements of the federal Health Insurance Portability and Accountability Act (HIPAA), visitors/ride-along participants who may come into contact with private health related information will agree in writing, to keep all confidential information learned during their visit/ride-along participation confidential.

WHEREAS in connection with the undersigned’s participation in the <Insert Agency Name> Visitation/Ride-Along Program, the undersigned may become privy to certain information that should not be disclosed to other individuals and which may include data which is classified as private, confidential or non-public under State and Federal law;

NOW, THEREFORE, in consideration of the promises and other good and valuable consideration, the sufficiency of which is hereby acknowledged, the undersigned does hereby:

Agree to refrain from disclosing to a spouse, parent, child, friend or any other individual information of any nature that the undersigned may obtain through his/her participation in the <Insert Agency Name> Visitation/Ride-Along Program.

____________________________________  __________________________
Signature      Date

____________________________________  __________________________
Witness       Date

*Provide with copy of Notification of Criminal Penalties and Civil Action for the Misuse of LEIN*