

Confidentiality Agreement

I understand that Emory expects me to honor the confidentiality of all practices, procedures and information learned during the course of my employment. Faculty, staff, student and other personnel records, financial records, human resources/payroll records, legal documents, data and information in any form—oral, printed and/or electronic are considered confidential. I will be expected to ensure that any information considered confidential coming into my possession during the performance of the duties of this position is protected against loss, unauthorized access, use, modification or disclosure, and other misuse through security safeguards as it is reasonable in the circumstances to take.

I agree to access any information *only* upon obtaining prior approval and as necessary in the performance of my duties or as otherwise directed by my supervisor. I agree to preserve the security of all information, and to not divulge any of it in any form, except when and as authorized by my supervisor. I understand that I am prohibited from communicating this information during *and* after the period of my employment.

I, _____, acknowledge that I have read the confidentiality agreement, understand my responsibilities as they pertain to confidentiality and security of information I come across during the performance of my duties, and consent to the principles of this agreement.

Signature of employee

Signature of Supervisor

Date