



CONFIDENTIALITY AGREEMENT

As an employee/volunteer of ACLAMO Family Centers Programs, I understand that I may have access to confidential information about students and their parents. By signing this statement, I am indicating my understanding of my responsibilities to maintain confidentiality and agree to the following:

- I agree not to divulge, publish, or otherwise make known to unauthorized persons or to the public any information obtained in the course of my working/volunteer relationship that could identify the persons who participated in the program.
- I understand that I can NOT take pictures, videos, produce or reproduce any images of the students and their parents.
- I understand that all information about students and their parents obtained or accessed by me in the course of my work is confidential. I agree not to divulge or otherwise make known to unauthorized persons any of this information, unless specifically authorized to do so by office protocol or by a supervisor acting in response to applicable law or court order, or public health or clinical need.
- I understand that I am not to read information and records concerning students and their parents, or any other confidential documents, nor ask questions of study participants for my own personal information but only to the extent and for the purpose of performing my assigned duties on this research project.
- I understand that a breach of confidentiality may be grounds for disciplinary action, and may include termination of employment/volunteer services.
- I agree to notify my supervisor immediately should I become aware of an actual breach of confidentiality or a situation which could potentially result in a breach, whether this be on my part or on the part of another person.

Employee/Volunteer signature: _____

Date: _____

ACLAMO builds a stronger community one child and one family at a time

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