Confidentiality Agreement

The University of the Arts
Work Study Program

I understand that by the virtue of my employment at The University of the Arts in the Work Study Program I may have access to verbal, written, or computerized records which contain individually identifiable information about other students.

This includes, but is not limited to, confidential information that is pertinent to students, employees, donors, clients, customers, patients, applicants and their associated records/files, financial records/budgets, and other information that if released, may be harmful to the University and or Agency/Organization and/or individual persons. I understand and agree not to divulge or publish any confidential or sensitive information obtained in the course of performing Work Study job duties, to persons inside or outside the College. However, I realize that, if directed by a University/Agency/Organization official to do so, I may be required to divulge confidential information in order to comply with governmental laws and regulations or to conduct University, Agency and or Organization business with individuals who have a right and need to know such information, or to comply with court-ordered/subpoenaed requests for information.

I agree to review and abide by any other confidentiality policies and procedures of the University and the Agency/Organization where I am placed if it is outside of the University and to abide by applicable privacy protection laws and regulations.

The disclosure of individually identifiable information is prohibited by the Family Educational Rights and Privacy Act of 1974 (FERPA).

I agree to consult my assigned supervisor for protocol regarding the proper course of action relative to the release of confidential information. I understand that failure to comply with this agreement violates The University of the Arts’ institutional policies and could constitute just cause for disciplinary action including termination of my employment and expulsion from the University regardless of whether criminal or civil penalties are imposed. Work Study Student employees may also be subject to the University’s judicial process. I understand that this agreement is valid throughout my entire term of employment with the University’s Work Study Program.

Employee Name (print) _________________________________________________________

Employee Signature ___________________________________________ Date ____________