



Employee Confidentiality and Privacy Agreement

I understand and acknowledge the following:

- It is my legal and ethical responsibility as an Averett University employee to preserve and protect the privacy, confidentiality, and security of all confidential information (as defined in OP 025) relating to Averett University, its students, employees, and activities in accordance with applicable law and University policy.
- I will collect, access, use, or disclose confidential information only in the performance of my University employment duties or when required by law. I will disclose information only to persons who have the right to receive that information and will disclose only the relevant information needed.
- My right to access information or data is strictly limited to the specific information and data that is relevant and necessary for me to perform my job-related functions and duties. I will maintain the privacy and confidentiality of such information or data, including its storage and disposal.
- I will not knowingly discuss any confidential information with or within hearing distance of other persons who do not have the right to receive the information. I will protect confidential information which is disclosed to me in the course of my relationship with Averett University.
- Before sharing information or data with others, I will make reasonable efforts to ensure that the recipient is authorized to receive that information or data.
- My access to University electronic information systems is to be used in a secure manner following safe computing guidelines:
 - I am responsible for keeping my login and password information secure. If I believe someone else has used my user ID/password, I will immediately report such use to the Information Services Help Desk and request a new password or other assistance to secure the device and confidential information.
 - I may be personally responsible for any breach of confidentiality resulting from an unauthorized access to data accomplished through use of my login, or access to a device through theft, loss or other compromise.

I understand that if I intentionally misuse confidential information that I obtain through my employment, I will be subject to disciplinary action up to and including termination. I further understand that upon my separation from Averett University, I have an ongoing responsibility for maintaining the confidentiality of University information.

I certify that I have read this form; I understand it; and I agree to comply with its terms and conditions.

**Employee/Student Worker
Name** *(please print neatly)*:

P.I.D.:

Student Signature:

Date:

Employee Signature:

Date:

Supervisor/HR Signature:

Date:
