**Central Washington University**

**Confidentiality Protocol Statement and Agreement**

The files and records maintained by all academic departments and interdisciplinary programs of the *(your department name)* contain information that is the property of CWU and *(your department name)*. Because this material is not only crucial to the effectiveness of the academic departments and interdisciplinary programs, but is also often sensitive or confidential as well, all those who work with it are expected to observe the highest standards of discretion and confidentiality, protecting both CWU and *(your department name)* interests in its records and the privacy of those to whom the information relates.

This protocol applies to all types of confidential information, regardless of form; including but not limited to, hard copy, electronic, film, oral, or any other medium.

Confidential information is described by, but not limited to, the following general classes:

* Individual/personal information (name, biographical information, address, telephone number, e-mail addresses, cell phones, etc.) and CWU Identification number, of students, faculty, staff, and/or administration;
* Financial and/or budgetary data of *(your department name)* and its academic departments and interdisciplinary programs
* Grades, class enrollment/rosters, class standings, etc.

Guidelines for handling confidential information include:

* Hard copies generated by the *(your department name)* and/or its academic departments and interdisciplinary programs must be marked plainly as the property of CWU and confidential.
* Confidential documents should be kept under lock or for electronic files password protected when possible.
* When confidential information is mailed, or sent through intra-office channels, always place it in a sealed envelope and clearly mark it “Confidential.”
* Dispose of all confidential documents by shredding in a timely manner.
* Any *(your department name)* student, faculty or staff file (both electronic or hard copy) will not be kept outside of *(your department name)*academic departments or interdisciplinary programs

I understand and accept the following conditions and responsibilities as a student employee at Central Washington University:

* I acknowledge that in the course of my work activities I may have access to documents, data, or other information, some or all of which may be confidential and/or privileged from disclosure whether or not labeled or identified as “confidential.”
* I understand that unauthorized disclosure of such protected information can adversely impact the University, individual persons, or affiliated organizations.
* I shall treat **ALL** information accessible to me in the performance of my duties as protected information, regardless of its format (e.g., electronic, paper, oral), unless and until advised otherwise by my supervisor.
* I shall use protected information for the sole purpose of performing my job duties. I shall not disclose protected information to ANYONE without prior authorization from my supervisor.
* I shall not permit myself or any other person to copy or reproduce protected information other than what is required in the regular performance of my job duties.
* I shall not use my student employee access to alter, delete, or enter fraudulent information into any academic, financial, or other educational records pertaining to anyone.
* I shall immediately report to my supervisor any unauthorized use, duplication, or disclosure of protected information.

Except as required by my activities, I shall never, either during or after my employment with CWU, the *(your department name)*or any of its academic departments or interdisciplinary programs, directly or indirectly use, publish, disseminate or otherwise disclose to any third party, or use for personal gain any information acquired in the course of my activities. Further,th**e federal Family Educational Rights Privacy Act (FERPA) requires that employee information be protected and kept confidential. Sharing confidential information with others who are not authorized to receive it (outside the scope of my job duties) is a serious federal violation and is cause for immediate dismissal, and could lead to further disciplinary action.**

I have read the Confidentiality Protocol Statement and Agreement and understand that failure to adhere to one or more of the above listed conditions and responsibilities will subject me to disciplinary action and/or discharge from employment.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_