

Office of _____
The College of William and Mary

STUDENT ACKNOWLEDGMENT OF CONFIDENTIALITY

- As a student employee in the Office of _____, I understand that I will be working with sensitive and confidential information.
- I understand that what I learn in this office about University students and University business must remain in this office and is not to be discussed with anyone else, including the student involved. Discussion in the office must be limited to business purposes only.
- I also understand that I cannot access confidential information for any reason other than for that what I have been asked to do by my supervisor.
- I understand that alteration or misuse of University identification cards, records, documents, or computer data is not acceptable and I could be charged with lying and/or stealing under the Honor Code.
- I understand that I am potentially subjecting the University to litigation for violation of the Family Educational Rights and Privacy Act if I break the confidentiality of this office. If I violate any of the above, I will be held accountable by the University Judicial system for failure to comply with directions of the College official. I understand that I may be subject to dismissal from my position if I have violated any of the above. (Details regarding the Judicial Code and Honor Code are available in the current Student Handbook.)

Student's Signature

Date

Witness

Date