

STUDENT EMPLOYEE CONFIDENTIALITY AGREEMENT

Initial I, _____ (PRINT NAME), understand and accept the following conditions and responsibilities of my employment at Towson University as a student employee:

1. In the performance of my duties, I may have access to confidential information, which includes records of other students, faculty, or staff; business information, correspondence and reports. All of these types of information are considered confidential.
2. I shall treat ALL information accessible to me in the performance of my duties as Confidential Information, regardless of its format (e.g., electronic, paper, oral), unless and until advised otherwise by my supervisor. I will take all necessary steps to prevent anyone from gaining knowledge of my password; and report a breach of that knowledge immediately.
3. **I agree to not access Confidential Information unless I am authorized to do so, and I agree to maintain the confidentiality and privacy of Confidential Information during and after my period of student employment with the University.** I shall not, directly or indirectly, communicate orally, in writing, or by e-mail, social media, or through any other means, any Confidential Information to any unauthorized person, including, without limitation, other students, work colleagues, family members, etc.
4. I may gain access to sensitive or confidential information and records that may be protected from disclosure by federal or state law. Examples include education records protected under the Family Educational Rights and Privacy Act of 1974 (FERPA). I understand that unauthorized disclosure of such Information can adversely impact the University, individual persons, or affiliated organizations.
5. I shall use my access to Confidential Information for the sole purpose of performing my job duties. I shall not disclose Information to ANYONE without prior authorization from my supervisor.
6. I shall not permit myself or any other person to copy, reproduce, alter, delete, or enter any Information other than what is required in the regular performance of my job duties.
7. I am aware that any breach of this agreement, release of Confidential Information, or any abuse of my position, may result in disciplinary action through the Towson University Code of Student Conduct or otherwise, including possible termination of my position, prosecution through appropriate University disciplinary processes, expulsion from the University, and civil and criminal legal action.
8. The provisions contained in this agreement are considered conditions of my participation in programs and employment offered by the University.

I have reviewed and read this document. I understand its terms and its legal effect.

STUDENT EMPLOYEE NAME (PRINT)

ID NUMBER

SIGNATURE

DATE

SUPERVISOR NAME (PRINT)

SIGNATURE

DATE