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Moses Lake, WA 98823
509.793.2369

Volunteer Confidentiality Statement

Please read the following Confidentiality Statement once through, then fill in the necessary blanks and sign and date the form. Thank you.

As part of serving as a Volunteer for Big Bend Community College, I understand that I may have access to confidential and sensitive information and at any time during OR after my role as a Big Bend Community College Volunteer, I shall not disclose to any other person or entity any confidential or sensitive information which has come into my possession or knowledge during the course of serving as a Big Bend Community College Volunteer. Nor shall I use any such confidential information for my personal use or advantage or make it available to others. I will not disclose or use, directly or indirectly, any confidential information (e.g., names, email addresses, students' grades/academic standing, personal health information, financial information, life situation, etc.), or make such confidential information available to others for use in any way unless special circumstances apply (see next paragraph).

I, _____ (Big Bend Community College Volunteer), understand and will discuss with the student(s) my duty to inform the Program/Volunteer Coordinator(s) of any situations where there is concern of harm to self or others. This is the only time when confidentiality can be broken. Furthermore, I am aware that as Big Bend Community College Volunteer, I am a mandatory reporter, as defined in RCW 26.44.030, **AND** have watched the following video OR power point presentation pertaining to reporting requirements:

[DSHS Mandatory Reporting Video](#)

[DSHS Mandatory Reporting Presentation Slides](#)

By my signing below, I hereby acknowledge that I have read this agreement and agree to its terms.

Big Bend Community College Volunteer Signature:
Date:
Program/Volunteer Coordinator Signature:
Date:

