

Workforce Confidentiality Agreement

I, _____, understand that South Community Inc. has a legal and ethical responsibility to maintain client and organizational privacy. As a condition of my employment/engagement/affiliation with South Community Inc., I understand that I must sign and comply with this Agreement at hire and annually.

Types of Confidential Information

I understand:

- o that during the course of my employment/engagement/affiliation with South Community Inc., I will utilize, see and hear confidential client information. I understand that I need this information to perform my functions for South Community Inc.
- o that during the course of my employment/engagement/affiliation with South Community Inc., I may see or hear other confidential information such as financial or operational information pertaining to this organization that I am obligated to keep confidential.
- o that any client information or organizational information that I access or view at work does not belong to me.

My Agreement

By signing this document, I understand and agree that: I will not disclose any client information and/or confidential organizational information unless such disclosure is in compliance with South Community Inc.'s privacy/security policies and procedures **and** is required for the performance of my job.

I will not discuss any information pertaining to clients and/or the organization in an area where unauthorized individuals may hear such information (for example, in hallways or staircases, on elevators, in the lunch room, on public transportation, at restaurants or at social events). I understand that it is never acceptable to discuss any South Community Inc. client information in public areas, even if specific information, such as client's names, are not used.

I will not access or view any client or organizational information other than is required to do my job.

I will not make inquiries about any South Community Inc. information for any individual or person or entity that does not have proper authority to have such information.

I will not make any unauthorized transmissions, copies, disclosures, inquiries, modifications or deletion/destruction of client information or South Community Inc .proprietary information.

I will keep my personal access codes, user ID's, access keys and passwords used to access computer systems, buildings, records or other organizational systems or equipment confidential at all times.

I will immediately return all property belonging to the organization at the conclusion of my employment/ engagement/affiliation with South Community Inc. This includes keys, keyfob, documents, electronic devices, identification badges, etc.

If I have any question about whether access to certain information is required for me to do my job or whether certain persons or entities are permitted access to South Community Inc. information, I will ask my supervisor or the Privacy Officer for clarification.

Consequences for Violating this Agreement

I understand that violation of this Agreement may result in disciplinary action up to and including termination of my employment/engagement/affiliation with South Community Inc. and/or suspension, restriction or loss of privileges in accordance with South Community Inc.'s policies as well as potential personal, civil and criminal penalties.

Maintaining the Agreement

I agree that my obligations under this Agreement regarding client information and organizational information will continue after the conclusion of my employment/engagement/affiliation with South Community Inc.

I have read the above Agreement and agree to comply with all its terms as a condition of my continuing employment/engagement/affiliation with South Community Inc.

WORKFORCE MEMBER

Signature

Date

Printed Name