

SAMPLE STAFF CONFIDENTIALITY STATEMENT

I am aware that in the context of my daily work I will encounter confidential information. This information may pertain to families who come to **(Name of your organization)** as clients. I also acknowledge that confidential information pertaining to fellow staff members is to be treated with the same confidentiality as that of a client.

I understand these realities and the need for confidentiality. I understand that the information I am exposed to or become aware of is to be treated with the highest respect and confidentiality. I commit myself to the protection of such information by not revealing any confidential information I may become aware of during my employment at **(Name of your organization)**. I also recognize that this responsibility extends beyond the tenure of my employment with **(Name of your organization)**. There is never an appropriate time to reveal confidential information concerning an **(Name of your organization)** client or staff member.

I also recognize the potentiality of legal liability if I disregard my responsibility of confidentiality.

By signing this Statement, I acknowledge having read the above statement, and commit to comply with all matters herein.

Name (print):

Signature:

Date:
