



## **VOLUNTEER STATEMENT OF CONFIDENTIALITY**

**Confidential Information.** I am aware that during the course of my role as a volunteer, confidential information may be made available to me. I understand that this information must not be given out or used outside of Employer's premises or shared with non-employees. At the end of my volunteer service, whether voluntary or involuntary, I agree not to disclose, utilize, or exploit this information with any other individual or organization, and will return all proprietary materials and school owned property to Gateway Lab School. I also agree to keep all information I hear and see about students and staff members in the utmost confidentiality according to HIPPA/FERPA laws.

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Volunteer

Date