

**CONFIDENTIALITY AGREEMENT**

This is to certify that I, ­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a Wider Horizons' volunteer, understand that any data created, witnessed or obtained during the performance of my duties must remain confidential. This includes all information about members, volunteers, and employees of Wider Horizons or other colleague or referral organizations, as well as any information otherwise that is marked or known to be confidential. In particular, this includes names and donation records.

However, I understand that information about members and volunteer experiences may be shared with WH staff consistent with WH policies and guidelines presented in volunteer trainings.

I further understand that any unauthorized release or carelessness in the handling of this confidential information is considered a breach of the duty to maintain confidentiality.

I further understand that any breach of the duty to maintain confidentiality could be grounds for dismissal.

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Signature of Volunteer

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Date

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Signature of Staff Witness