

VOLUNTEER CONFIDENTIALITY AGREEMENT

To: THE CALGARY ROMAN CATHOLIC
SEPARATE SCHOOL DISTRICT NO. 1
(The District)

I, _____ agree that I will act at all times to preserve the
(Name of Volunteer)

confidentiality of all personal information of which I become aware during the course of fulfilling my duties as a volunteer at École St. Cecilia School.

I further agree that in particular I will preserve the confidentiality of any personal information which I receive with respect to students, parents, staff and administration.

I will hold all such information in the strictest of confidence and I shall not use, copy or disclose such information to any other individual within or outside of the District, in whole or in part, in any manner or form, unless I have obtained the permission of the Principal.

Executed and witnessed this _____ day of _____, 201____.

Child's Name: _____ Homeroom: _____

(Print Name of Volunteer)

(Signature of Volunteer)

(Signature of Principal)