## **TEXAS WOMAN'S UNIVERSITY**

## Office of Human Resources – Student Employment

## STUDENT EMPLOYEE CONFIDENTIALITY AGREEMENT

I,	(	(PRINT NAME), understand and accept to	he following
conditions and responsibilities of my er		exas Woman's University as a student assi	_
. In the performance of my duties, I may have access to confidential information, which includes records of other tudents, faculty, or staff; business information; correspondence and reports. All of these types of information are onsidered confidential.			
I shall treat ALL information accessible to me in the performance of my duties as Confidential Information, egardless of its format (e.g., electronic, paper, oral), unless and until advised otherwise by my supervisor.			
confidentiality and privacy of Confid with the University. I shall not, direct	ential Information ly or indirectly, com	I am authorized to do so, and I agree t during and after my period of student amunicate orally, in writing, or by e-mai ding, without limitation, other students, w	employment il, any
federal or state law. Examples include	education records pract unauthorized disc	n and records that may be protected from rotected under the Family Educational Rig losure of such Information can adversely	ghts and Privacy
5. I shall use my access to Confidential disclose Information to ANYONE with		e sole purpose of performing my job dutie on from my supervisor.	s. I shall not
6. I shall not permit myself or any othe what is required in the regular performa		produce, alter, delete, or enter any Inform s.	ation other than
may result in disciplinary action throug	h The Texas Woman osecution through ap	Confidential Information, or any abuse of n's University Code of Conduct or otherwoppropriate University judicial processes, e	vise, including
	I understand that m	ed conditions of my participation in progray supervisor will retain a copy of this pag	
I have reviewed and read	this document. I	understand its terms and its legal e	ffect.
Student Employee Name (Print)	ID Number	Student Employee Signature	Date

Supervisor Signature

Date

Supervisor Name (Print)