



**Tolleson Union High School District #214
CTE Internship Program
2020-2021**

CONFIDENTIALITY AGREEMENT

I understand that I may have access to confidential patient/client information and confidential information about the business and financial interests of my employer (referred to as “Business Partner” in this Agreement). I understand that confidential information is protected in every form, such as written records and correspondence, oral communications, and computer programs and applications.

I agree to comply with all existing and future “Business Partner” policies and procedures to protect the confidentiality of confidential information. I agree not to use, copy, make notes regarding, remove, release, or disclose confidential information unless permitted by the “Business Partner” policy.

I agree not to share or release any authentication code or device, password, key card, or identification badge to any other person, and I agree not to use or release anyone else’s authentication code or device, password, key card, or identification badge. I agree not to allow any other person to have access to the “Business Partner’s” information systems under my authentication code or device, password, key card, or identification badge. I agree to notify the appropriate administrator immediately if I become aware that another person has access to my authentication code or device, password, key card, or identification badge, or otherwise has unauthorized access to the “Business Partner’s” information system or records.

I agree that my obligations under this Agreement continue after my employment or my time as a volunteer/ employee intern ends.

I agree that in the event I breach any provision of this Agreement, the “Business Partner” has the right to reprimand me or to suspend or terminate my employment or volunteer status with or without notice at the discretion of the “Business Partner,” and that I may be subject to penalties or liabilities under state or federal laws. I agree that if the “Business Partner” prevails in any action to enforce this Agreement, the “Business Partner” will be entitled to collect its expenses, including reasonable attorney’s fees and court costs.

If the student is under 18 years of age, the undersigned parent/guardian agrees to the terms and conditions above. The undersigned parent/guardian also agrees that he or she may be subject to liabilities incurred by the student.

Field Experience Mentor (Print) Signature Date

Student (Print) Signature Date

If student is under 18 years of age, a parent/guardian signature is required.

Parent/Guardian (Print) Signature Date

