



**EMPLOYEE CONFIDENTIALITY AGREEMENT**

I understand that student, employee, and financial information from any sources, and in any form, is confidential and is available to me solely for the performance of my official duties as a Marquette employee. I shall protect the privacy and confidentiality of student, employee, and financial information to which I have access and shall use it solely for the performance of my official duties. I agree not to access student, employee, or financial information unless such access is required for the performance of my official duties. I further understand that failure to comply with this agreement may lead to disciplinary action, up to and including termination, and/or civil/criminal penalties.

**FURTHERMORE:**

- I agree that I will be a responsible user of data.
- I agree to store data obtained from this system under secure conditions.
- I will make every reasonable effort to maintain privacy of the data.
- I will make every reasonable effort to interpret the data accurately and in a professional manner.
- Prior to sharing data with others, electronically or otherwise, I will ensure that the recipient is authorized and has a need to access the data and understands their responsibilities as a user.
- I will log out of computers and various software applications when not in use.
- I will not disclose my password to other individuals. I will not use another person's password. If I have reason to believe my password has been compromised I will report it to a supervisor or the Database/Security Administrator.
- I am responsible for protecting the security of the records and confidentiality of the information to which I have access. Specifically:
  - I will not use the information I have access to in an unauthorized manner.
  - I will neither knowingly include, nor cause to be included, a false or misleading entry in any record.
  - I will not change or delete any entry in any record unless it is done in accordance with university policies and procedures.
  - I will not copy, reproduce, electronically print or forward any record, except in the performance of my defined duties and in accordance with university policies and procedures.
  - I will not divulge, in any way, knowledge of any confidential information that I have learned to unauthorized individuals.
  - I will dispose of confidential reports in an appropriate manner when done with them.

My signature indicates that I have read, understand, and agree to abide by the terms and conditions of this agreement.

Employee Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Employee Name (print): \_\_\_\_\_

MUID: \_\_\_\_\_