Enlisted Aide Volunteer / Confidentiality Statement

I, _____, hereby volunteer to be considered for the

Print (Rank, Last Name, First Name, Middle Initial)

US Army Enlisted Aide Program. I understand that by volunteering for this duty, my General Officer/Flag Officer (GO/FO) or my supervisor (Aide de Camp or Senior Enlisted Aide), will entrust me with certain detailed duties granting me access to GO/FO official quarters and possible sensitive information. Additionally, if selected, I understand that I will be detailed in conjunction with the needs of the Army within the Enlisted Aide Community.

Under no circumstances will I violate, diminish, or tarnish the trust, honor, and respect bestowed upon me by my superiors or fellow aides. I will always uphold the highest standards of my profession at all times. I shall endeavor to respect and maintain the confidentiality and privacy of the GO/FO. Incumbent upon the performance of my official duties, I understand that I may overhear or read personal and/or private information directly related to the GO/FO or his/her family, friends, or colleagues. I will ensure such information is kept private and is not discussed, published, or disseminated outside the work place or within hearing of other people who do not have a need to know about the information.

Under no circumstances will I make derogatory comments about the inner or personal dealings of the GO/FO or his/her family.

I acknowledge that any substantiated violation of this confidentiality statement may be grounds for dismissal from the Enlisted Aide Program, adverse administrative action, and/or punitive action under the Uniform Code of Military Justice (UCMJ).

Nothing in this agreement prevents me from reporting to proper military authorities inappropriate or unlawful conduct, including, but not limited to, violations of the Joint Ethics Regulation (JER) or abuses of authority.

I certify that I have read and understand this confidentiality statement and that I am volunteering for Enlisted Aide duty.

Signature: _____ Date: _____

Witness
Print Name: _____

Signature: _____ Date: _____