



## Confidentiality Agreement for Substitutes

In exchange for being granted the privilege of substituting in Shenandoah County Public Schools, I agree to keep confidential and refrain from discussing any information that I may obtain about students during the course of this work.

This confidentiality agreement includes, by way of example and without limitation, maintaining confidentiality of the names, characteristics, disability conditions, and any other aspects of students whom I come into contact with during the observation. I acknowledge that I am in the substitute position to perform the duties of the absent staff member and will not record, take notes on, or report any information regarding students. Additionally, if I have concerns with staff, the students, or the educational program/teaching or classroom environment, I agree to immediately report those concerns to an administrator.

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Substitute's Name (print)

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Date

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Substitute's Signature