



VOLUNTEER CONFIDENTIALITY AGREEMENT

I understand that as a volunteer, I may have access to confidential information about the clients that utilize the services of the Society of St. Vincent de Paul and any partner agencies. I understand that any IMMERSION information that I learn about a client is confidential and that information about a client cannot be disclosed to anyone without their express permission. I understand the law provides for the possible civil and criminal penalties for disclosure of confidential client information. This includes information I receive whether obtained either verbally or written through the Society of St. Vincent de Paul, through direct contact with IMMERSION clients and their families or any partner agency.

All of this information is to be held in strict confidence in order to protect the rights of all clients and their families.

I recognize that the disclosure of such information by me may cause irreparable harm to the Immersion client, their family, and the Society of St. Vincent de Paul, and that accordingly, the family may seek any legal remedies against me which may be available.

I agree that I will not:

- Reveal to anyone the name or identity of a client.
- Repeat to anyone any statements or communications made by or about the client.
- Reveal to anyone any information that I learn about the client as a result of discussions with others while providing support to the clients.
- Write or publish any articles, papers, stories, or other written materials which will contain the names of any client or information from which the names or identities of any client can be discerned. If a paper is written about my volunteer work here, I agree that I will submit it to a supervisor at The Society of St. Vincent de Paul for approval.

I hereby agree by signing below that I have read this document, fully understand its meaning and promise to adhere to the confidentiality agreement described above.

Address Phone Number

Name (Print) Signature Date