CONFIDENTIALITY AGREEMENT

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Students employed by the Office of Student Financial Aid Services must review and sign the Confidentiality Agreement each academic year. Completed forms are to be returned to the employee's immediate supervisor.

Employee Information:	
Student's Name	PeopleSoft ID
(including FERPA), State of Connecticut, University Services' Information Security Policies. In my Financial Aid Services, I understand that in my students, parents or statistical information about understand that I may be assigned login crede such credentials outside of the workplace or for prohibited. By signing below, I indicate that I ha agree to maintain the confidentiality of all such access to these credentials by providing son responsible for all activity done using my individual I understand that pursuant to Public Act 98-14 Notice" the State reserves the right to monitor and violations of University Information Security policiand Privacy. In certain situations of the aforem confidentiality (including any discussions about MySpace, Twitter, Blogs, or any other Internet ralso result in appropriate disciplinary measures	42 and the State of Connecticut's "Electronic Monitoring nd/or log all activities without notice, and that all suspected by will be investigated by the Office of Information Security ity, State, or Federal representatives might be included in tentioned Policies and Regulations and/or any breach of the workplace on Social Networking sites, e.g. Facebook, related forum) will result in immediate termination and may in accordance with local, State, and Federal laws, as well tules of Conduct for All University Employees, and the
Student's Signature	_ Date
Supervisor's Signature	 Date