



OATH OF CONFIDENTIALITY

I, the undersigned, understand that personal information maintained in the University of Calgary's Better Impact volunteer management system is confidential. I acknowledge that access to, and use and disclosure of this information is governed by the Freedom of Information and Protection of Privacy Act of Alberta and the University's Acceptable Use of Electronic Resources and Information Policy.

I further acknowledge that this data may only be accessed, used, or disclosed for work related purposes and that I may only use, add new information or alter, change, modify, or delete existing personal information in accordance with applicable legislation and policy and if I am authorized to do so.

I understand that all university information assets remain in the university's custody or control and that I may not use or disclose them for any non-university work-related purpose.

I understand that failure to abide fully by the above agreement is grounds for disciplinary action up to and including termination of your relationship with the University of Calgary.

Signed by:

Name (print) _____

Signature: _____

Category: Employee Volunteer Other _____

Signed by Supervisor:

Name (print) _____

Signature _____

Date _____

All administrators of the Better Impact Volunteer System must sign the Oath of Confidentiality and identify the category to which you belong.

If you are receiving access to the Better Impact volunteer system as part of your employment duties (Better Impact Department Administrator), the form should be signed by your supervisor who is responsible for HR matters. In all other circumstances, the form should be signed by the Better Impact Department Administrator.