

**MODEL CONFIDENTIALITY STATEMENT
FOR UNIVERSITY EMPLOYEES**

As a member of the workforce of the University of Pennsylvania, I may be provided with access to personal, proprietary, and/or otherwise confidential data. This can include information about students, staff, faculty, applicants for admission or employment, research subjects, alumni, donors, and other types of information.

I will maintain in strictest confidence the data to which I have access. I will not share confidential information with any individual who is not authorized to view such data.

I will use my access to confidential data for the sole purpose of conducting legitimate business of the University. I understand that the use of confidential data for personal purposes is prohibited.

I also understand that the use of data in violation of University privacy-related policies is prohibited. The University's privacy-related policies cover student records, faculty and staff records, alumni information, use of Social Security numbers and other areas. I understand that these policies and additional guidelines relating to privacy can be found at www.upenn.edu/privacy.

In addition, I understand that certain schools and centers of the University of Pennsylvania performing health care or health plan functions are bound by privacy and security-related policies and procedures created under federal HIPAA (Health Insurance Portability and Accountability Act) rules. If I am unsure of whether HIPAA applies, I will ask [enter name/title of designated individual] or contact the University's Privacy Office at 1-888-BEN-TIPS.

I will use reasonable efforts to safeguard confidential University data from unauthorized access. When I am granted access to confidential information electronically, I will protect my password and not share it or make it available to anyone else. I understand that email is not a secure method of transmitting information and should not be used to transmit highly sensitive data when alternative communications are available.

I understand that failure to follow policies and procedures concerning access to confidential data may result in sanctions and disciplinary action, up to and including termination of employment at the University of Pennsylvania.

If I have any questions about the appropriate use, handling and/or sharing of confidential data, I will consult with [enter name/title of designated individual].

I have read, and agree to abide by, this Confidentiality Statement.

Employee Name: _____

Signature: _____

Date: _____