Confidentiality Statement

On-Campus Student Employment

I, ______________________, understand that employment information is confidential and may not be divulged to anyone except the person who owns the information; those faculty, staff, or administrators who have need to know; and those individuals or agencies who fulfill the requirements under the Federal Educational Rights and Privacy Act of 1974, as Amended (FERPA). If I release information that I will be discharged immediately. I have read the above and agree to maintain the confidentiality of all information that I have access to through this office.

_________________________________  ___________________________
Signature                                Date

_________________________________  ___________________________
Witnessed by (HR Personnel)              Date: