



United Way of the Eastern Upper Peninsula

Confidentiality of Information & Computer Security Agreement

In accordance with professional ethics and applicable laws, the United Way of the Eastern Upper Peninsula (UWEUP) is committed to protecting the confidentiality of all consumer, volunteer, donor, financial, employee, organizational, and other types of information as outlined in this agreement. UWEUP places significant trust in all who have access to sensitive information and with that trust comes a high degree of responsibility.

Confidentiality

I understand that each and every client, visitor, volunteer, employee, and other individual associating or interacting with UWEUP has the legal right to confidential treatment of information about him/herself.

Any and all information I am exposed to in the course of performing my professional duties or which I come in contact with in the course of my interactions with UWEUP shall be treated as highly confidential and shall not be accessed or disclosed to anyone who does not need that information to perform his/her professional duties.

Accordingly, I pledge and assure that I will protect the confidentiality of any and all consumer, volunteer, financial, donor, organizational, and other types of information to which I am exposed. This pledge of confidentiality applies to all sources of information and methods of communication including but not limited to paper documents, computer systems, verbal, social media, email, and telephone.

I will use appropriate safeguards to secure all information created, received, or maintained from unauthorized access and to protect the information from damage, loss, alteration, and tampering. I also understand that information in my possession that I acquire from UWEUP and use outside of UWEUP campus is subject to the same safeguards as within the confines of UWEUP.

I furthermore understand that confidentiality is a condition of my employment/volunteer association and violations of this agreement or any of UWEUP's policies and procedures related to confidentiality may subject me to legal and/or disciplinary action up to and including immediate termination from my employment/professional relationship with UWEUP.

I understand that my duty to maintain confidentiality continues even after I am no longer volunteering/associated with UWEUP. **Refer to UWEUP Code of Ethics.*

Printed Name: _____

Signature: _____

Date: _____

Volunteer Center Coordinator: _____

Date: _____

Computer Security Agreement

As a user of United Way of the Eastern Upper Peninsula's information system, I acknowledge the following:

1. The combination of my user name and password or my user code and user password is the legal equivalent of my signature. I will not disclose them to anyone under any circumstances. I will not write down or otherwise document my access codes where other individuals may potentially view them.
2. Once I have signed onto the information system, I will not allow anyone else to use the system to access donor, volunteer, financial, employee, organizational, or any other type of information. When I leave the immediate physical vicinity of a computer upon which I am signed into a system, I will ensure that I properly log out of the system. Use of my computer access codes by anyone other than me is forbidden under any and all circumstances.
3. I will not attempt to learn another user's User Name/User Code or Password/User Password nor will I use any other access codes other than my own.
4. If I suspect or have any reason to believe that my User Name/User Code or Password/User Password may be known by others, I will notify my supervisor or the Information Systems Department immediately. Furthermore, if I suspect that information has been accessed inappropriately, I will notify my immediate supervisor.
5. I understand that access to UWEUP's information systems is a requirement for many positions within the organization and computer system access should be used with the utmost discretion. At no time am I authorized to utilize the system for any reason other than its intended use to perform my professional duties nor may I use it for my own or other's personal or professional gain.
6. I am responsible and accountable for all entries made and all retrievals accessed under my access codes. I understand that my use of computer systems will be periodically monitored to ensure compliance with this agreement in accordance with the UWEUP's Information Systems Department's audit policy.
7. If I have remote access to any of the UWEUP information systems, I will ensure appropriate security measures are implemented and maintained on the remote device. Furthermore, I will ensure no data is downloaded or otherwise stored on the remote device. I will take all reasonable and practical measures to minimize the risk of unauthorized access at the remote location.

I have read and fully understand the above and agree to be bound by each and every term and condition of the Confidentiality of Information & Computer Security Agreement. I understand that violations may result in my computer access being limited or revoked.

Printed Name: _____

Signature: _____ Date: _____