University of Tennessee Health Science Center
Student Worker Employment Confidentiality Agreement

As a student worker or student committee representative at the University of Tennessee Health Science Center, the nature of my position allows and/or requires me to have access to confidential student information the disclosure of which is prohibited by the Family Educational Rights and Privacy Act of 1974 (FERPA). On or off the job conduct could affect or threaten the security and confidentiality of this information. I am therefore expected to adhere to the following:

1. The information and materials to which I have access will be treated in a professional and confidential manner. Such information includes, but is not limited to: student grades, financial information, identification numbers, class schedules, places of employment, etc.

2. I will not make use of or permit unauthorized use of any information in files maintained, stored, or processed in any office or facility affiliated with the University.

3. I am not permitted to seek personal benefit or allow others to benefit personally by knowledge of any confidential information made available to me by virtue of my work assignment.

4. I will not exhibit or divulge the contents of any record or report to any person except in the conduct of their work assignment and in accordance with the policies and procedures of the University.

5. I will not knowingly include or cause to be included in any record or report a false, inaccurate, or misleading entry. I will not knowingly expunge or cause to be expunged in my record, or report a data entry.

6. No official record or report, or copy thereof, from the office where it is maintained may be removed except in the performance of a person’s duties.

7. I will not aid, abet, or act in conspiracy with another to violate any part of this confidentiality agreement.

8. Any knowledge of a violation must immediately be reported. Each student employee/student representative holds a position of trust and must recognize the responsibilities of preserving the security and confidentiality of University information. Violation of this agreement is a violation of FERPA and the policies and procedures of the University, and may lead to reprimand, termination, or dismissal from the university.

I have received a copy of, have read, do understand, and will comply with the Student Worker Employment Confidentiality Agreement of The University Tennessee Health Science Center.

Student Employee/Representative Name (Please Print): ________________________________

Student Signature __________________________________________ Date. ____________

Supervisor Signature __________________________________________ Date. ____________

Department ________________________________________________

Cc: Registrar’s Office

Updated: 7/19/2017