



IMPERATIVE INITIATIVE FOR MOTIVATION OF GLOBAL CARE (IIMGC)

Confidentiality Agreement for Members/Volunteers

IIMGC organization requires that strict confidentiality be maintained with respect to all information obtained by its members/volunteers concerning the organization, as well as the clients and others they serve.

The members/volunteer shall not disclose any information obtained in the course of his/her membership, volunteer placement to any third parties without prior written consent from IIMGC. This includes but is not limited to information pertaining to financial status, operations such as budget information, donations of money or gifts in kind, salary information, meetings, and information pertaining to clients, members, leaders, staffs or other volunteers.

No information concerning any member/volunteer will be divulged without prior written consent of the member/volunteer. This includes addresses, telephone numbers, members/volunteers private information etc.

Failure to comply with the confidentiality policies of the organization may result in disciplinary actions, including the dismissal of the member/volunteer.

I understand the above and agree to uphold the confidentiality of these matters both during and following my membership/volunteer service with the organization.

OR

As a leader/member/volunteer of this organization, I understand that I may have access to confidential information, both verbal and written, relating to clients, members/volunteers or staff and the organization.

I understand, and agree, that all such information is to be treated confidentially and discussed only within the boundaries of my office, membership/volunteer position at this organization.

I also agree not to discuss these same matters after I have left my membership/volunteer position at this organization. I further understand that breach of this agreement shall constitute grounds for and may result in termination of my membership/volunteer status with this organization and that I may face the law.

Except where such disclosure is consistent with stated policy and relevant legislation. Please sign below to indicate your acceptance and agreement with these terms outlined above.

Member/Volunteer full Name and Signature:

Date: