

Skagit County Coroner's Office Employee or Volunteer Confidentiality Agreement

As an employee or volunteer, I understand that I may have access to confidential information, which may include, but is not limited to conversations, financial information, statistical records, internal reports, memos, communications, and third-party information.

Accordingly, as a condition of and in consideration of my access to confidential information, I promise that:

1. I will use confidential information only as needed to perform my legitimate duties as an employee or volunteer of the Skagit County Coroner's Office.
2. I will only access confidential information for which I have a need to know.
3. I will not divulge, copy, release, alter, loan, review, or destroy any confidential information within the scope of my professional activities affiliated with the Skagit County Coroner's Office.
4. I will not misuse confidential information or carelessly care for confidential information.

I understand that my obligations under this Agreement will continue after termination of my employment or volunteer work.

I understand that I have no right or ownership interest in any confidential information acquired during my employment or volunteer work with the Skagit County Coroner's Office.

I understand that violation of this agreement is subject to immediate dismissal from employment or volunteer work and possible legal liability.

Employee/Volunteer Signature and Date: _____

Printed Name: _____