

Tenant Volunteer Confidentiality Agreement

I, the Volunteer, agree and understand that:

1. Any documents or other information which may be made available to me while volunteering at Bridge Housing is 'Confidential Information'.
2. I understand that this Confidential Information may include medical condition and treatment, sexual orientation, relations with family members, names, addresses and other personal and financial information of others, including staff members, clients, and board members.
3. I will not, either directly or indirectly:
 - a) Record or copy any Confidential Information
 - b) Discuss or communicate the Confidential Information with others.
 - c) Use the Confidential Information for any reason other than for undertaking my volunteering duties.
4. I will:
 - a) Make sure that no person other than a person approved by Bridge Housing is able to access the Confidential Information
 - b) Make sure that Confidential Information is safely and securely stored, and
 - c) Inform Bridge Housing of any conflict of interest that may occur during my volunteering agreement.
5. This Confidentiality Agreement will not stop me from releasing Confidential Information:
 - a) If legally required by a government agency
 - b) If required under any law or request or policy enforced by the law
 - c) If the information has already been made public, and
 - d) If I have written approval from Bridge Housing before releasing the information.
6. I agree that if asked by Bridge Housing, I will immediately return all originals and copies of the Confidential Information to the company and destroy all documents containing or prepared using all confidential information.

Name of Volunteer

Signature

Date

Name of Witness

Signature

Date