VOLUNTEER CONFIDENTIALITY AGREEMENT



A UNIT OF THE UNIVERSITY SYSTEM OF GEORGIA Division for University Advancement

3219 University Street - Savannah, Georgia 31404 - Savannahstate.edu

The personal information you provide on this form is being collected for the purpose of ensuring you understand your obligation to confidentiality as a volunteer for Savannah State University. If you have any questions about the collection information on this form, please contact the Director of Advancement Services, Division for University Advancement, Savannah State University, and 3219 University Street, Box 20439, Savannah, Georgia 31404 – Telephone 912.358.3059.

Savannah State University is responsible for maintaining information that may be privileged, confidential and/or exempt from disclosure under public law. Savannah State University uses and discloses personal information in accordance with the federal, state, and Board of Regents policy regarding personal information privacy.

The purpose of this agreement is to outline the conditions relating to access and use of records that is the property of or in the possession of the Savannah State University. I understand that:

- As a volunteer of the University I may be given access to confidential University information which relates to the University, its business partners, clients, students, employees, alumni, donors, prospective donors and/or volunteers.
- For all purposes, "confidential information" shall mean information, documentation, and methodology relating to or embodying all alumni and/or University Advancement database information; all information received via telephone communication, email or mail communication; computer systems; results of survey, solicitation, or research; training programs; and all materials and methodologies relating to any of the foregoing but not including such information or documentation which I can conclusively establish:
 - a) was within my knowledge prior to commencement of my initial service with the University, and/or
 - b) Was or became general public knowledge without any act on my part.

I agree that:

- Apart from my duties as a volunteer of the University, I will not, during or after my service with the University, discuss with or disclose to others confidential information that I have become aware of, and will only use any confidential information for the purposes of researching, informing, cultivating, soliciting and stewarding donors, prospective donors, alumni, and friends to the University, and not for my own benefit or the benefit of any other organization.
- All materials prepared for me, and by me, for the University shall be and remain the property of the University and, apart from my duties as a University volunteer, I will not make or permit anyone else to make any copy, abstract, or summary of this material in any form; printed, electronic, digital, or otherwise or of any other material disclosed to me in the course of my volunteer service.
- For the duration of my volunteer service with the University, I agree to conduct myself professionally and ethically, within the boundaries of all applicable state laws, and University policies, and in accordance with the Freedom of Information and Protection of Privacy Act.
- I will adhere to all policies and practices of Savannah State University including, but not limited to prospect clearance, fundraising project prioritization, and event management and related protection issues.
- Any sharing of confidential information by any means may result in the immediate termination of my volunteering from Savannah State University.
- The obligations set out above survive the termination of my volunteer service with the University.

ACKNOWLEDGEMENT

Volunteer Signature:	Volunteer's Name (Print)	Date:
Signature of Authorization:	Authorizer's Name (Print)	Date:

Authorized Signatories are Director of Advancement Services and VP for University Advancement