STATEMENT OF CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT Between

The Department of Children, Youth, and Families

And

Contract Number #23-

I. Recitals

- 1.1 Pursuant to Department of Children, Youth, and Families (the "DCYF") Contract Number #23attached hereto ______ (the "Contractor") has agreed to provide comprehensive Early Childhood Education and Assistance Program (ECEAP) services.
- 1.2 During the course of providing such services the Contractor and its employees, agents, and subcontractors will have access to confidential or personal information owned by the DCYF relating to DCYF Contact Number #23-_____ which may be protected from disclosure under the Public Records Act (chapter 42.56 RCW), the Freedom of Information Act (5 U.S.C. 522), or other state or federal statutes.
 - II. Definition of Confidential or Personal Information
- 2.1 "Confidential Information" or "Data" means information that may be exempt from disclosure under either chapter 42.56 RCW or other state or federal statutes. Confidential Information includes, but is not limited to, personal information, agency source code or object code, and agency security data.
- 2.2 "Personal Information" means information identifiable to any person, including, but not limited to, information that relates to a person's name, health, finances, education, business, use or receipt of governmental services or other activities, addresses, telephone numbers, social security numbers, driver license numbers, e-mail addresses, credit card information, law enforcement records or other identifying numbers or Protected Health Information, any financial identifiers, and other information that may be exempt from disclosure under either chapter 42.56 RCW or other state and federal statutes.
 - III. Terms of Agreement
- 3.1 As an employee, agent, or subcontractor of the Contractor I have access to information or data described and contained DCYF Contract Number #23-_____. This information may be confidential information or data, and I understand that I am responsible for maintaining this confidentiality. I understand that the information may only be used for the purposes of the work described in DCYF Contract Number #23-____.
- 3.2 I understand that before I am allowed access to information and data that is described and/or contained in DCYF Contract Number #23-_____. I must sign and agree to the following:
 - (A) I have been informed and understand that information provided under DCYF Contract Number #23-_____ may be confidential information or data and may not be disclosed to unauthorized persons. I agree not to divulge, transfer, sell, or otherwise make known to unauthorized persons any information described or contained in DCYF Contract Number #23-____.
 - (B) I also understand that I am not to access or use the information that is provided under DCYF Contract Number #23-_____ for my own personal information, but only to the extent necessary and for the purpose of performing my assigned duties as an employee of the Contractor under this Agreement. I understand that a breach of this confidentiality will be

grounds for disciplinary action which may also include termination of my employment and other legal action.

(C) I agree to abide by all Federal and state laws and regulations regarding confidentiality and disclosure of the information in DCYF Contract Number #23-____.

By signing this Agreement, the undersigned agree to this Agreement being effective as of the last signing date noted below.

Contractor Name:	Employee/Sub-Contractor/Agent Name:
Signature:	
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:

Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:
Signature:	Signature:
Print Full Name:	Print Full Name:
Job Title:	Job Title:
Date:	Date:

(The number of signature lines can be deleted and copied to meet your needs).