

CONFIDENTIALITY AGREEMENT

In compliance with confidentiality provisions, as specified in the Confidentiality Policy for Oklahoma Correctional Industries, I hereby agree and assert that I will not willfully divulge, or use for any purpose other than as required for fulfilling my job duties, any confidential information, specifically as such relates to assuring the right to privacy of persons, facilities and agencies who participate in the data collection efforts. I hereby assert that I have read and understand all provisions of the Confidentiality Policy, and agree to comply with all provisions of the procedure. I understand that anyone who, in violation of this written agreement to maintain confidentiality, willfully discloses any information shall be deemed guilty of a serious offense which may be punishable in an administrative action or a court of law, which may result in imprisonment or a fine or both.

By my signature below, I pledge full compliance with all provisions of maintaining confidential information and will not divulge or discuss the identity of individuals, facilities, agencies, or any other entity included in the data, to anyone who is not entitled by law to that information. I also agree to report any misuse of such information or violation of the confidentiality agreement and cooperate fully in investigating and prosecuting any persons violating the policy and procedures on confidentiality.

Offender:	Supervisor:
Name: _____	Name: _____
DOC #: _____	Title: _____
Institutional Address: _____ _____	Institutional Address: _____ _____
_____ Signature Date	_____ Signature Date