

## **CONFIDENTIALITY AGREEMENT**

I, \_\_\_\_\_ understand and agree that in the performance of my duties at A and J Residential Services. I must hold the individual's information in confidence. I have read and understand the policy regarding confidence. I have read and understand the policy regarding confidentiality and release of information. Further, I understand that due to requirements of state law and the Health Insurance and Accountability Act (effective April 14, 2003), that intentional or involuntary violation of confidentiality may result in dismissal, fines and imprisonment.

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_