I understand and agree that any violation of the responsibilities explained in this agreement will subject me to discipline, possible termination of employment or legal liability. I understand and agree that my privileges hereunder are subject to periodic review, revision and, if appropriate, renewal and that the University may revoke my access code, other authorization or access to confidential information at any time.
I further understand and agree that I have no right or ownership interest in any confidential information that I may have access to as part of my affiliation with the University and that my obligations to keep such information confidential will remain in effect even after my affiliation with the University ceases.

Faculty/ Staff/Consultant/ Student/Volunteer Signature	Date
Printed Name	Emplid