

Appendix C
STATEMENT OF CONFIDENTIALITY AND NON-DISCLOSURE

As an employee of the City of Bothell, I understand that I may have access to both electronic and nonelectronic information, data, and records (hereafter referred to as "data"). I understand that some of this data described below is confidential and/or sensitive, and I am responsible for maintaining and protecting this data against accidental or unauthorized access. I also understand that my access to this data as described below is limited to - and solely for the purpose of - the performance of my job duties.

By signing below, I affirm that I have been advised of, understand, and agree to the following terms and conditions of my access to the data contained in the information systems of the City of Bothell.

- I have been informed and understand that some data held by the City of Bothell is confidential and/or sensitive and may not be disclosed to unauthorized persons or in an unauthorized manner:
 - Sensitive data includes but is not limited to passwords, Social Security numbers, credit card information, protected health information (PHI), personally identifiable information (PII), bank account numbers, credit card numbers, tax ID numbers and criminal justice data that are stored, processed or transmitted on or by City information systems or network resources.
- I agree not to divulge, transfer, sell, or otherwise make known to unauthorized persons any confidential data. Further, I understand that if I receive a request for confidential data, or for information that I think may constitute confidential data, I will forward that request to either my departments designated public records person or the City Clerk's office for response. I understand and agree that my obligation to avoid such disclosure will continue even after I leave the employment of the City of Bothell.
- I also understand that I am not to access or use this data 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 City of Bothell under this Agreement. I understand that a breach of this confidentiality will be grounds for disciplinary action, which may include immediate termination of my access to the information, termination of my employment, criminal penalties, and civil liability.

Signature of Employee

Printed Name of Employee

Date