

ST. TAMMANY PARISH SCHOOL BOARD



CONFIDENTIALITY AGREEMENT

I, _____, while working
(PRINT NAME)

at, volunteering at, and/or visiting MAGNOLIA TRACE ELEMENTARY

understand that all information I see and/or hear pertaining to any student is confidential.

I acknowledge that the names of students and any other information obtained during my time at this school are not to be released to any other person.

Signature

Date

Signature

Date

Teacher

Print Student Name