University of Missouri Access and Confidentiality Agreement

As a faculty or staff member, consultant, volunteer or student at the University of Missouri you may learn of, or have access to, confidential information. This agreement will help you understand what confidential information is and what your responsibilities are.

Confidential information includes, but is not limited to:

- Student or personnel information—employment records, social security numbers, grades or other personally identifiable student information, performance evaluations, disciplinary actions, etc.
- Patient information—medical records, physician-patient conversations, admittance information, patient/member financial information, other personally identifiable health information, etc.
- Third party information—information protected by non-disclosure agreements or other contractual obligations.

In certain circumstances, the following may also be considered confidential information:

- University of Missouri information—financial and statistical records, job applications, unpublished strategic plans, internal reports, memos, contracts, peer review information, communications, proprietary computer programs, source code, proprietary technology, etc.
- Copyrighted material and other intellectual property
- Third party information—computer programs, client and vendor proprietary information, source code, proprietary technology, etc.

Confidential information is valuable and sensitive. It is protected by law and by University of Missouri policies ([Collected Rules and Regulations, §110.005, Business Policy Manual, §108](#)). The intent of these laws and policies is to assure that confidential information is used only as necessary to accomplish the organization’s mission.

You are required to conduct yourself in strict accordance with applicable laws and University policies regarding confidential information. As a condition, and in consideration, of your access to confidential information, you agree to:

1. Use confidential information only as needed to perform your legitimate duties
   a. Only access confidential information which you need to know
   b. Do not divulge, copy, release, sell, loan, review, alter or destroy any confidential information except as properly authorized
   c. Do not otherwise misuse or treat carelessly confidential information.
   d. Understand that you will be held responsible for your misuse, careless or wrongful disclosure of confidential information

2. Safeguard and prevent disclosure of your password and/or access code or any other authorization that enables access to confidential information. You will be held responsible for any failure to safeguard such passwords, codes or authorization.

3. Report activities to your supervisor that you suspect may compromise the confidentiality of information. Reports made in good faith, including your name, will be held in confidence to the extent permitted by law.

4. Abide by your obligations under this Agreement even when you are no longer affiliated with the University.

5. Understand that you have no right or ownership interest in any confidential information referred to in this Agreement.
University of Missouri Access and Confidentiality Agreement

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