As an employee in the University of Wisconsin-Milwaukee (UWM), I acknowledge and understand my responsibilities concerning my role in the criminal background check process as follows:

1. For purposes of this document, "confidential information" is defined as information that is (a) information disclosed to me or known by me as a consequence of my employment and not intended for general knowledge outside UWM or the applicable Division (Division); or (b) protected by State or Federal laws.

   Confidential information may include records or data protected by laws such as the Family Educational Rights and Privacy Act (FERPA) which protects student educational records, the Gramm-Leach-Bliley Act which protects financial records, the Health Insurance Portability and Accountability Act (HIPAA) which protects patient health information, and the following Wisconsin Statutes: Section 19.21-19.39 (public records laws) and Section 19.81-19.98 (open meetings laws). Confidential information also includes information and records related to criminal background checks conducted by and/or on behalf of UWM and personnel records.

2. I understand that during my employment and after the termination of my employment, I am expected to hold the confidential information of UWM and the Division in trust and confidence. I understand my obligation to safeguard confidential records, and that I may not use or disclose them, directly or indirectly, except as may be necessary in the performance of my duties for UWM and the Division. I understand that any unauthorized disclosure could be highly damaging to UWM, its employees, students, donors, or others.

3. I understand that I may not remove materials containing confidential information from UWM or the Division unless authorized to do so by the Division head. Any and all such materials are the property of UWM and/or the Division. Upon termination of any assignment or as requested by my supervisor, I understand that I must return all such materials and copies to the Division.

4. I understand that I should contact the Division head if I am asked to disclose confidential information or if I have questions relating to what constitutes a confidential record.

5. I understand that violation of the expectations outlined above could subject me to disciplinary action, including termination or legal action, or both, consistent with UWM's existing rules, policies, and agreements concerning employee discipline.

I acknowledge that I have read and understand the above information.

EMPLOYEE: ___________________________       DIVISION HEAD: ___________________________

Signature                                   Signature

Date                                        Date