



Confidentiality Agreement

This is to certify that I, _____, a mentor at The Bridge Program, understand that any information (written verbal, or other form) obtained during the performance of my duties, must remain confidential. This includes all information about s member or other material marked or known to be confidential.

I understand that any unauthorized release or carelessness in the handling of this confidential information is considered a breach of duty to maintain confidentiality.

I further understand that any breach of the duty to maintain confidentiality could be grounds for immediate dismissal and/or possible liability in any legal action arising from such breach.

Signature of mentor

Date