

Myersville Elementary School

2019/2020

Volunteer Confidentiality Agreement

- I understand that the work I do is of great benefit and service to the staff and students of Myersville Elementary School. As part of my volunteerism, I may see, hear, or be in the vicinity of information regarding students and staff.
- I, _____ (please print), agree that I will preserve confidentiality for all information seen or heard during the course of my volunteer hours, and uphold our principal of integrity at Myersville Elementary School. I also agree, by signing this form, that I have viewed and understand all the volunteer presentation available on the Myersville Elementary School website.
- Address: Street, City, State and Zip Code: _____

- Date: _____
- Signature: _____

FCPS has implemented a new Security Management System. All visitors and volunteers are asked to provide their date of birth, including month, day and year as part of this new system. Your ID will be scanned as both a visitor and a volunteer for Security Management System.