



## **VOLUNTEER CONFIDENTIALITY STATEMENT**

I, \_\_\_\_\_, hereby agree to regard all information received in the performance of my volunteer work in this health care facility as confidential.

I understand that this facility respects residents' rights with regard to privacy of information and I agree to respect these rights in the performance of my volunteer duties and keep "professional" confidentiality in all my statements outside the facility.

I agree to respect residents' rights to privacy, as well as those of the family and the facility whenever I make community presentations or participate in volunteer recruitment programs. The content of these presentations will be approved in advance by the Director of Volunteer Services.

\_\_\_\_\_  
Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Volunteer Services

\_\_\_\_\_  
Date