

Capricorn Citizen Advocacy

CONFIDENTIALITY AGREEMENT FORM

Form Number:	4.1.0.1	Approved by Management Committee:	27 th March 2024
Version:	3.0	Signed off by Executive:	27 th March 2024
Responsible person:	Coordinator	Scheduled Review Date:	27 th March 2027

I, _____ of _____
(please print full name) (please print address)

understand that information about Capricorn Citizen Advocacy; its Citizen Advocates, Protégés, staff, Management Committee members and volunteers with whom I come into contact as part of my engagement may be of a confidential nature.

I will not discuss any such confidential information in the general community, nor outside the course of my role with Capricorn Citizen Advocacy Inc. I will also not seek to obtain, or share information which is not necessary for the fulfilment of my role.

If sharing of information is necessary in fulfilling my role, I will do so discreetly and respectfully, always ensuring that words and imagery I use regarding the people served by Capricorn Citizen Advocacy and that of the organisation itself, are presented in a positive manner.

I understand that any alleged breaches of this agreement may result in the Management Committee discussing my actions and it may require me to fully explain the circumstances and details of any alleged breach.

I also agree that if the Management Committee believes that a breach has occurred it can formally caution me. If it is considered to be a more serious case, it may decide that my engagement with Capricorn Citizen Advocacy be formally reviewed and possibly terminated.

Signed: _____ Date: _____

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