

HCSG



Confidentiality Agreement

I agree to be aware of, and abide by, the rules of confidentiality pertaining to all information on HCSG, its consumers, volunteers, staff and contractors.

I accept the procedure of feedback from/about consumers must be through the Program Manager or Chief Executive Officer of HCSG and that it is not my position to act on any information received from consumers without the Program Manager's or Chief Executive Officer's agreement.

Signature: _____

Date: _____