

Statement of confidentiality

I, _____, agree to keep all pertinent information (i.e. HIV/ SA/ MH status of participants) obtained by my connection with the common ground –SA/HIV/MH Training and the Ryan White Program strictly confidential. Furthermore, I understand that releasing such information to unauthorized persons or agencies may result in legal action taken against me. I understand this confidentiality statement is FOREVER and that I have a moral, ethical and legal obligation to abide by this agreement.

Signature

Date

Supervisor Signature

Date

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