



UNIVERSITY ADVANCEMENT CONFIDENTIALITY STATEMENT

John Carroll University alumni and friends records are treated with the utmost privacy. To ensure this security, anyone working on behalf of the university is asked to sign a statement of confidentiality. Please read, sign, and return this form to the office of University Advancement where it will remain on file for one year, after which the University reserves the right to request a renewed agreement.

I, _____, understand that all data received from John Carroll University is considered confidential and I will not discuss or otherwise share this information except as appropriate when acting as a representative of the university. I understand that I act as a representative of the university solely and exclusively for the purpose of solicitation for University purposes. I understand that I am not authorized to act beyond the scope of the said solicitations. I also understand that personal information received from the University Advancement Office including, but not limited to, address, phone numbers, email, employment, and gift information is to be used solely for official John Carroll University purposes.

Print Name _____

Signature: _____

Date _____

FOR OFFICE USE ONLY:

BANNER ID: _____ **Class Year:** _____

Date Received: _____ Received by: _____