



CONFIDENTIALITY STATEMENT

In my duties with Augusta University or AU Health System, I am aware that the information from Office of Philanthropy & Alumni Engagement, AU, AU Health, AU Foundation, GHS Foundation and MCG Foundation to which I have access is to be treated in a confidential and professional manner. By signing this Confidentiality Statement, I agree to abide by the following guidelines. Failure to follow these guidelines may result in the revocation of my access privileges, disallowance of the sharing of information necessary to perform my position responsibilities satisfactorily and other disciplinary and/or legal action.

- 1) The information will only be used for the support of official Augusta University/AU Health functions and may not be disclosed to any third party or for any purpose other than Augusta University Enterprise related business as approved in advance.
- 2) Adequate physical security procedures will be implemented to guarantee that at no time will unauthorized persons have access to the information stored in the database or to information in printed reports, etc.
- 3) I understand that Raiser’s Edge, the MCGF Portal, and other Philanthropy systems have an internet-based connection, which must not be left online unless it is actively being used.
- 4) Access codes, passwords, sign-on procedures, etc. will not be divulged to any other party and their security will be closely guarded.
- 5) I agree to report any violation of these guidelines to the Senior Director of Information & Data Services at ids@augusta.edu

Print Name: _____

Signature: _____ Date: _____

Title: _____ Telephone: _____

Donor Bill of Rights and AFP Code of Ethical Principles and Standards

I acknowledge receipt of the Donor Bill of Rights and the AFP Code of Ethical Standards and agree to abide by the guidelines and principles of these two standards in all my actions and work as a representative of Augusta University.

I acknowledge that I have received a copy of the Donor Bill of Rights and The AFP Code of Ethical Principles and Standards.

Print Name: _____

Signature: _____ Date: _____

Title: _____