Access and Privacy Office
2500 University Drive NW
Calgary, AB T2N 0N9 1N4
https://www.ucalgary.ca/legal-services/access-information-privacy

Oath of Confidentiality

I, the undersigned, understand that I may have access to physical or electronic records containing confidential business and personal information maintained in the University of Calgary's ("**University**") enterprise information systems or other University managed electronic resources (the "**IT Systems**") as part of my duties and responsibilities relating to my role described below ("**Role**").

I acknowledge that my access to, collection, use or disclosure of this information may be governed by the *Protection of Privacy Act* (Alberta), the *Health Information Act* (Alberta), or the Canadian Institutes of Health Research's Tri-Council Policy Statement (TCPS 2), as applicable. I further acknowledge that the University's Information Asset Management Policy, Acceptable Use of Electronic Resources and Information Policy, Privacy Policy, Health Information Management Policy, or Research Integrity Policy may apply, and I confirm I have read those policies that apply to my Role.

I will only access, collect, use, alter, modify, disclose or delete confidential business or personal information for purposes directly related to my Role, in accordance with applicable legislation and policies. I will keep any IT Systems login information (e.g. username, password) confidential and will abide by all administrative and technical measures adopted by the University to secure confidential business and personal information, including completing annual privacy awareness training.

I understand that I must immediately notify my supervisor and the Access and Privacy Office (at accessandprivacy@ucalgary.ca) if I become aware of any: (i) violation of the law or policies referenced above; (ii) unauthorized access, collection, use, alteration, modification, disclosure or destruction of confidential business and personal information; or (iii) or unauthorized access or misuse of IT Systems. I understand and acknowledge that the University monitors access to the IT Systems and may revoke or restrict my access at any time and for any reason, with reference to applicable law and University policy.

I understand that I must sign this oath before the University will grant access to its physical or electronic records containing confidential business and personal information or IT Systems, and that failure to abide fully by its terms is grounds for disciplinary action up to and including suspension of access or termination of my Role in accordance with University policy and any applicable collective agreement.

EXECUTED BY

Name: _____

Role: ☐ Employee ☐ Contractor ☐ Volunteer ☐ Other _____

Signature: _____ Date: _____

RECEIVED BY (SUPERVISOR)

Name: _____

Title: _____ Department/Faculty/Unit: _____

Signature: _____ Date: _____

The University of Calgary (UCalgary) respects your privacy. The personal information requested on this form is being collected under the authority of section 4(c) of the Alberta Protection of Privacy Act (POPA). It will be used for the purpose of administering access to UCalgary managed electronic resources and information systems. It will be managed in accordance with UCalgary's Privacy Policy and may be input into automated systems to generate content or make decisions, recommendations, or predictions. If you have any questions about this form or the collection, use or disclosure of your personal information, please contact the UCalgary Access and Privacy Office at accessandprivacy@ucalgary.ca.