



**Family Educational Rights and Privacy Act
Student Worker Security Agreement**

I acknowledge that Salisbury University's non-disclosure/FERPA policies, guidelines, and procedures have been made available to me by providing the following link: <http://www.salisbury.edu/registrar/Resources/FERPA/> for review and consideration. I also certify that I have been given the opportunity to have any questions about my responsibilities addressed. I am, therefore, aware that I am accountable for these policies and procedures as they govern the acceptable performance of my job.

Sanctions: I understand that failure to abide by these policies, guidelines, and procedures or otherwise disclose Confidential Information when not authorized to do so can result in dismissal from my student worker position.

Signature: _____

Printed Name: _____

Date: _____