



COMMUNITY CARE TASMANIA

DECLARATION OF CONFIDENTIALITY

I _____

Of _____

Do solemnly and sincerely declare that, I have been provided information in regard to privacy and confidentiality and I note this in our Employee Handbook and the Policies and Procedures in accordance with the Privacy Act 1988.

I will not directly or indirectly communicate or divulge to any person/s **any information or matter** which comes to my knowledge in consequence of my position as an employee of Community Care TASMANIA.

Disclosure of information will only be permitted in the course of my duties or by order of a court of law.

I understand that this requirement for confidentiality is to continue after employment with Community Care TASMANIA, and I am continually bound by this agreement signed this day.

Declared At: 8 Broadland Drive, Launceston Tasmania 7250

This _____ Day Of _____ 20_____

Signed _____
(Employee)

Witness _____

Witness
(Full Name And Address)

Date _____