

Employee Declaration Form for Confidential Information

This Employee Declaration Form ensures that all employees acknowledge their responsibility to protect confidential and sensitive information. Please read each section carefully and sign below to confirm your understanding and agreement.

Employee Name: _____

Department/Position: _____

Date: _____

Confidentiality Agreement:

I, the undersigned, acknowledge that during my employment with *[Company Name]*, I may have access to confidential and proprietary information, including but not limited to: business processes, client lists, financial data, products, software, designs, trade secrets, and other sensitive data.

- I agree to maintain the strict confidentiality of all such information, both during my employment and after my employment ends.
- I will not disclose, share, or use any confidential information for any purpose other than to fulfill my employment duties.
- I understand that unauthorized disclosure or misuse of confidential information may result in disciplinary action, including termination of employment and/or legal action.
- If I am unsure whether certain information is confidential, I will consult my supervisor before disclosing it.

I hereby declare that I have read, understood, and agree to abide by the above confidentiality obligations.

Employee Signature: _____

Date: _____

Note: This document must be signed and returned to Human Resources for your employment file.