

## **Confidentiality Agreement**

As an employee of L.E.A.P. Childcare Center Inc., I do hereby certify that I will respect the confidentiality rights of every child and their families who attend this child care facility. I understand that the confidentiality of each child's information is strictly maintained to protect the privacy rights of the families and children. I pledge that I will not discuss or otherwise communicate any form of information concerning the care or condition of any child with unauthorized individuals. Authorized individuals are those in Administration of L.E.A.P. Childcare Center. I understand that failure to abide by the child confidentiality requirements may result in my immediate termination.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_