## 2024-25 Database User Authorization and Confidentiality Agreement

, totion requ	iootou.					
Add	Change	Renew	Delete	Deletion effective date		
Database l	Jser Information	n:				
First Name			Last Name			
Instructional Specialist		Program	Staff	Program Administrator		
Other	If Other,	If Other, please specify.				
College Na	me (Or Busine	ss affiliation if O	ther)			
College/Bu	siness Address					
College/Business User Email				College/Business Us	ser Phone #	

## Confidentiality Agreement:

Action requested:

I acknowledge that by accessing and using the Foster and Kinship Care Education (FKCE) database, I shall comply with the provisions of Welfare and Institutions Code Section 10850 and CDSS Division 19 regulations concerning class participants confidentiality to ensure that:

- Records pertaining to FKCE class participants will be confidential and will not be open to examination for any purpose not directly connected with the administration of providing mandated training for Resource Families.
- No person will publish, disclose, use, or permit the use of, or cause to be published, disclosed, or used, any confidential information pertaining to FKCE class participants.
- All applicable college program employees, agents, and subcontractors shall be notified of these provisions, and also notified that any person knowingly or intentionally violating the provisions of said State law is guilty of misdemeanor.

## I further affirm that:

Databasa Haar Cirmatura

- I will not share my system user login credentials with other individuals.
- I will not store any confidential information on personal computers (either desktop or laptop) any electronic device, or removable storage media of any kind.
- I will not access the FKCE database after employment with college program has ended.
- Hard copies of any forms containing confidential information must be secured and shredded when discarded.

D-4-

Database Oser Signature	Date					
Database User's Supervisor Name	Supervisor Title					
Supervisor Signature	Date					
Please submit renewal annually for each database user and as soon as possible when adding or deleting users. The signature of the user being deleted is not required. Please submit completed form to <a href="mailto:fkceforms@cccco.edu">fkceforms@cccco.edu</a>						

Chancellor's Office Use Only

Form reviewed by User Access Completed by