Hamilton College

Agreement to Protect Hamilton College Information for Employees

I have read the Hamilton College *Policy on the Protection of Confidential and Sensitive Information*, the *Appropriate Use of Information Technology Resources*, and the *Data Classification Policy*. I understand and accept my obligations under, and agree to comply in all respects with, those policies.

I acknowledge that the unauthorized disclosure by me of Hamilton College data could subject me to criminal and civil penalties as and to the extent provided by applicable law, civil liability to the College and/or third parties, and/or disciplinary action including termination of my engagement by the College. I also understand that my obligations under this agreement to protect confidential and/or sensitive information continue after cessation of my engagement by the College any reason.

Signature

Name

Date