
I.	<u>POLICY TITLE:</u>	<u>CATEGORY AND NUMBER</u>
	CONFIDENTIALITY	DEVELOPMENT: 403

II. POLICY:

- A. Certain types of information about the Springfield Foundation's employees, donors, prospective donors, grantees, and grant applications are highly confidential. The disclosure of such confidential information to individuals not associated with the Foundation would significantly harm the organization's interests.
- B. Employees, trustees, interns, volunteers, suppliers and vendors are forbidden to disclose any information or data without the donors/prospects written permission.

The undersigned, being the duly elected and qualified Secretary of The Springfield Foundation, Board of Trustees, does hereby certify that the above is a true and correct copy of the policy adopted by this organization on the 21st day of June, 2005.

TO CERTIFY WHICH, witness my hand this ____ day of _____, 2005.

Board Secretary Signature

THE SPRINGFIELD FOUNDATION

**CONFIDENTIALITY POLICY
ACKNOWLEDGEMENT FORM**

Certain types of information about the Springfield Foundation’s employees, donors, prospective donors, grantees, and grant applications are highly confidential. The disclosure of such confidential information to individuals not associated with the Foundation would significantly harm the organization’s interests.

Employees, trustees, interns, and volunteers, are forbidden to disclose any information or data learned about the Springfield Foundation’s employees, donors, prospective donors, grantees, and grant applications in the course of employment or while volunteering without the individual’s or organization’s strict written permission.

I acknowledge that I have reviewed the confidentiality policy of the Springfield Foundation and agree to abide by the terms of the policy.

Signature

Date

Printed Name

Position: _____ Staff

_____ Trustee

_____ Volunteer