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Employee Name - Printed (Last, First)

10. Appendix D – Statement of User Responsibility

I understand that by virtue of my employment with the University of South Carolina, I may have access to data, information, systems, or files in various forms which contain individually identifiable information, the disclosure of which may be prohibited by federal or state law or by University policy. I acknowledge that the intentional disclosure by me of this information to any person could subject me to criminal and civil penalties imposed by law. I further acknowledge that such willful or unauthorized disclosure may also violate University of South Carolina policy and could constitute just cause for disciplinary action including termination of my employment on the first offense regardless of whether criminal or civil penalties are imposed. If I am in doubt about a request, I will consult with my supervisor prior to releasing the information.

My signature denotes that I have read and understand the above statement.

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Signature of Employee

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Date

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Signature of Supervisor

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Date