

## Non-Disclosure Agreement

Florida SouthWestern State College, the discloser, and \_\_\_\_\_, the recipient, an

employee of \_\_\_\_\_, agree that:

A) Recipient shall not disclose to any other individual or organization any confidential information, such as student information, passwords, network addresses, etc. gained as part of the current technology engagement without the expressed, written authorization by the Florida SouthWestern State College Information Technology Department.

B) If recipient has reasonable cause to believe that any confidential information, such as passwords, gained as part of the current technology engagement has been shared with or learned by someone other than the Florida SouthWestern State College employee disclosing this information, recipient will notify the Information Technology Department in writing ([abuse@fsw.edu](mailto:abuse@fsw.edu)) of the possible security compromise as soon as possible.

C) Access is granted to the following resource: \_\_\_\_\_

Only for the dates: \_\_\_\_\_ through \_\_\_\_\_.

This non-disclosure agreement shall terminate when any of the following conditions occur:

1. The confidential information has become known by the general public through no fault of the recipient or;
2. The information is disclosed publicly by the discloser or;
3. One year passes from the date of this agreement or;
4. The information loses its confidentiality through no fault of the recipient.

\_\_\_\_\_  
Authorized Signature, Information Technology

Dated: \_\_\_\_\_

\_\_\_\_\_  
Name of Discloser

\_\_\_\_\_  
Signature of Recipient

Dated: \_\_\_\_\_

\_\_\_\_\_  
Name of Recipient