

ADMINISTRATIVE POLICIES/PROCEDURES

Issuance No: A-2

Issuance Date: 7/1/2023

Subject: Confidentiality Policy

In accordance with the current OWD Issuance

All staff of the Workforce Development Board, sub-contracting/sub-recipient agencies, and/or consultants who use the statewide case management system as they carry out their duties in the workforce development system will comply with the Missouri Workforce Development System Confidentiality & Information Security Plan, as described in the current Issuance. Before being assigned an access code to the statewide case management system. Staff or consultants who do not use the statewide case management system but have access to confidential information as defined in The Plan will be required to sign the WDB Oath of Confidentiality stated below or comply with their agency's confidentiality policies. Documentation of confidentiality agreements will be maintained by the WDB.

The Oath of Confidentiality signature page follows

The Workforce Development Board of North Missouri is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Missouri TTY users can dial 711. This information can be translated into another language if requested. Please contact the WDB Office for translation assistance.

Esta información se puede traducir a otro idioma si se solicita. Comuníquese con la Oficina de la Junta de Desarrollo de la Fuerza Laboral para obtener ayuda con la traducción.

Ces informations peuvent être traduites dans une autre langue sur demande. Veuillez contacter le bureau du Conseil de développement de la main-d'œuvre pour obtenir de l'aide en matière de traduction.



of Confidentiality.

Oath of Confidentiality

Serving as a member of the workforce development system in North Missouri, I understand that I may have access to confidential records of various Departments and Divisions of the State and Federal government. I agree to guard this information against exposure and to adhere to all ethical and regulatory provisions regarding the divulging of information. I understand that I may discuss this information with appropriate personnel only, and only as is necessary to discharge the duties of my position. I further understand that violation of this Oath of Confidentiality could result in disciplinary action, based on the severity of the breach, as outlined in the current OWD Issuance.

Signature	Date

My signature below confirms that I have read, understand, and accept the above Oath

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