

Confidentiality Policy Agreement

Date: _____

To: _____

From: _____

Dear [Recipient's Name],

This Confidentiality Policy Agreement outlines the obligations and expectations regarding the protection of confidential information shared between the parties. By signing this agreement, [Recipient's Name] agrees to uphold the confidentiality of all sensitive information disclosed during the course of our professional relationship.

Definitions

For the purposes of this agreement, "Confidential Information" includes all non-public information that is disclosed in written, oral, or electronic form.

Obligations

[Recipient's Name] agrees to:

- Maintain the confidentiality of all Confidential Information.
- Use the Confidential Information solely for [specific purpose].
- Not disclose the Confidential Information to any third parties without prior consent.
- Take reasonable measures to protect the Confidential Information.

Duration

This agreement will remain in effect for [duration] unless terminated in writing by either party.

Signatures

By signing below, both parties agree to the terms outlined in this Confidentiality Policy Agreement.

[Recipient's Name]
[Title/Position]
Date: _____

[Your Name]
[Your Title/Position]
Date: _____

Thank you for your attention to this important matter.

Sincerely,

[Your Name]
[Your Title]
[Your Contact Information]