

Confidentiality Agreement

Date: _____

This Confidentiality Agreement ("Agreement") is made and entered into by and between:

Client Name: _____

Address: _____

Social Service Organization: _____

Address: _____

1. Purpose

The purpose of this Agreement is to ensure the confidentiality of information shared during the client's participation in services provided by the Social Service Organization.

2. Confidential Information

"Confidential Information" refers to all information received by the Client or the Organization that is not generally known to the public and is related to the services provided.

3. Obligation of Confidentiality

Both parties agree to maintain the confidentiality of all Confidential Information and will not disclose it to any third party without prior written consent.

4. Duration

This Agreement shall remain in effect for a period of _____ unless terminated by either party with written notice.

5. Governing Law

This Agreement shall be governed by the laws of the state of _____.

6. Acceptance

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

Client Signature: _____

Date: _____

Authorized Representative Signature: _____

Date: _____