



City of Duluth

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CONFIDENTIALITY NOTICE

I understand that in the performance of my official duties as an employee of the City of Duluth that I may have access to various documents and information which may be privileged, confidential, and/or exempt from disclosure under applicable law.

Such documents and information may include, but are not limited to: personnel files, medical information, criminal history record files, City real estate transactions, pending litigation, legal advice by City attorneys, etc.

I understand that any dissemination, distribution, or copying of this information for any purpose other than for what is intended, is strictly prohibited. I understand that any breach of the confidentiality of the information and/or documents may result in disciplinary action up to and including termination of employment. I further understand that I could be subject to legal action (criminal charges and/or civil lawsuit) for any breach of required confidentiality.

I certify by my signature that I am aware of my responsibilities concerning the confidentiality of information and/or documents during and following my employment with the City of Duluth.

Printed Name: _____

Signature

Date