



Resources • Support • Mentoring

NET Youth Coach Confidentiality Pledge

I agree to hold in confidence all pertinent information regarding the case to which I am assigned. I will not violate the confidential relationships between the NET program, its volunteers, related agencies, and all parties involved. I will not remove any written records from NET program office without the expressed permission of the NET Program Director.

I accept full responsibility for maintaining the confidential and private nature of all records and information. I understand that I am personally responsible and liable for any violation of this agreement.

Name (Print): _____

Address: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

(Youth Coach)

Signature: _____ Date: _____

(Witness)