

**STATE OF MAINE**  
**Department of Public Safety**

**Policy Statement on Confidentiality**

As employees of the Maine Department of Public Safety, we are vested by the people of the State of Maine with a trust and responsibility that requires the highest ethical standards. Employees of this Department must continually maintain the respect and confidence of the public. The following standards must be observed at all times. Failure to adhere to these standards may result in discipline up to and including discharge.

1. Except as necessary in the normal course of business, employees shall not divulge employer, customer, or co-worker information obtained in the performance of their official duties to any person within the Department, or outside of the Department, unless authorized to do so by a Department manager.
2. Employees shall not obtain information through department telephones, computer terminals, departmental documents, or other official means for any purpose other than official Department business. Any information obtained through authorized access to federal, state, or Department documents cannot be duplicated, altered, used or disclosed without proper authorization from a Department manager.
3. Except as necessary in the normal course of business, employees shall not remove documents, property or equipment from the workplace under any circumstances, unless authorized to do so by a Department manager.
4. Employees shall not take part in any activity of the Department that involves relatives or friends to the extent feasible. Relatives would include spouse, child, parent, grandparent, sister, brother, aunt, uncle, niece, nephew, first cousin, in-law and step-relative related to the employee by blood, marriage or adoption.
5. Employees shall not disclose computer security codes, voice mail codes, safe combinations, or entry combinations/passwords to the public, friends, relatives or co-workers.
6. Employees shall not trace, attempt to duplicate, or otherwise forge a client's, employer's, customer's, vendor's, or co-worker's signature on any document.

Employee's Name \_\_\_\_\_

Work Location \_\_\_\_\_

I certify that I have read and fully understand the standards set forth in the Department of Public Safety Policy Statement on Confidentiality.. I further understand that violation of these standards may result in discipline up to and including discharge.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date