

**Acknowledgment and Agreement  
Regarding Confidentiality Policy  
(Employee)**

By signing below, I acknowledge and agree to the following:

1. I have read and understand the Boise State University Foundation, Inc. Confidentiality Policy effective as of April 27, 2011 (the "Policy"). I am a "Responsible Person" as defined in the Policy.
2. I am familiar with the terms of the Policy and agree to be bound by them.
3. Certain information belonging to the Foundation, including but not limited to information about its donors, is confidential and is defined in the Policy as "Confidential Information."
4. In order to perform my duties for the Boise State University Foundation, Inc. (the "Foundation"), the Foundation must disclose some or all of its Confidential Information.
5. I have an obligation to protect the Foundation's Confidential Information at all times.
6. Failure to comply with the terms of the Policy may lead to disciplinary action, up to and including discharge of my employment with or discontinuation of my services to the Foundation.
7. In the event of a breach or threatened breach of this Policy, I acknowledge that money damages alone would be an inadequate remedy. Therefore, I agree that the Foundation shall be entitled to an injunction to restrain me from such breach, in addition to any other rights and remedies to which the Foundation may be entitled.
8. This agreement shall be construed and enforced in accordance with Idaho law, and I consent to jurisdiction in Idaho regarding any dispute arising under this agreement.
9. I am an employee at-will, and nothing in this Agreement or the Policy shall be interpreted to alter my status as an employee at-will.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature