

HUNTINGTON CITY MISSION
624, 10th Street
Huntington, WV 25701
(304) 523-0293

CONFIDENTIALITY STATEMENT

I shall respect the privacy of the people we serve and hold in confidence all information obtained in the course of professional service whether that information is obtained through written records or daily interaction with residents and/or staff.

I will not disclose an individual's confidence to anyone unless one or more of the criteria below applies:

- As mandated by municipal, state or federal law;
- To prevent a clear and immediate danger to a person or persons;
- Where I am a defendant in a civil, criminal or disciplinary action arising from the contact, and;
- Where there is a waiver previously obtained in writing and then such information may be revealed only in strict accordance with the waiver.

I shall be responsible to store and dispose of professional records in a manner that maintains confidentiality. I will not take or post client pictures/video on social media without written permission from the HCM.

I agree to maintain rights of confidentiality and shall possess a professional attitude which upholds confidentiality toward the people we serve, including colleagues, applicants, volunteers and residents, especially during sensitive situations.

I understand that any violation of this confidentiality may be grounds for dismissal and/or civil litigation.

Applicant's Name (print): _____

Applicant's Signature: _____

Date _____

HCM Volunteer Coordinator's Signature (Staff):

_____ **Date** _____

MISSION STATEMENT

The Huntington City Mission is a non-profit, non-denominational Christian organization established to meet the physical, emotional, social and spiritual needs of all individuals in its care. To that end, every guest will be given the opportunity to hear and respond to the Gospel, to grow in their relationship with God, and to achieve personal goals through an individualized plan designed to aid them in achieving self-sufficiency.

By signing below, I am simply acknowledging that I have read and am aware of your mission statement.

Applicant's Signature: _____

Date _____

HCM Volunteer Coordinator's Signature (Staff):

_____ **Date** _____