S&L Dispatching — Confidentiality & Information Security Acknowledgment

Confidential office form | Complete legibly; do not enter sensitive personal data in public systems.

Use: Complete each applicable field, sign/date where indicated, have authorized office staff review, then file in the restricted company folder.

Employee name: _____

Company: _____

Authorized systems: _____

I will protect confidential information and credentials: _____

I will report suspected data incidents: _____

I understand lawful reporting rights are not restricted: _____

Employee signature: _____

Date: _____

Supervisor signature: _____

Date: _____

OFFICE REVIEW — Received by: _____ Date: _____ Missing items / follow-up: _____