



**IMPERIAL VALLEY COLLEGE
STUDENT EMPLOYMENT**

STATEMENT OF PRIVACY ACT

I HEREBY CERTIFY THAT I understand that all records pertaining to students or other individuals are **PRIVATE AND CONFIDENTIAL** and may not by word of mouth or written notice leave the _____
(Department or Employer). I further certify that I understand Senate Bill #1227 is the California State Law relating to the release of student personal records.

I understand that if I violate the above regulations in any manner whatsoever, I will be held liable and that my Financial Aid eligibility or employment commitment from Imperial Valley College will be terminated **immediately**. **I will refer all requests for personal information/records to my immediate supervisor.**

I HEREBY STATE that I fully agree to and understand the above provisions and willingly sign this statement.

Printed Student Employee Name

Student Employee Signature

G00#

Date Signed