



Confidentiality Agreement for Child and Family Service Review (CFSR)

I, _____, a stakeholder participating in a child welfare CFSR Review, understand that I will come into contact with confidential information maintained within the State of Tennessee Department of Children's Services' records. This confidential information is protected by both State and Federal laws and regulations. I acknowledge that I am legally prohibited from releasing any information whatsoever to anyone outside of DCS, without the appropriate signed authorization. This includes written, oral, electronic, or any other means of disseminating information. I also agree that I will not remove confidential items from DCS property for any purpose, without prior approval. I will maintain the confidentiality of all information that I have access to. I understand that if I violate confidentiality laws or regulations, I could be subject to criminal prosecution or civil monetary damages.

Print Name

Signature

Date

Organization



Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.
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