

Sparks Police Department Explorer Security / Confidentiality Statement

By signing this form, the explorer has read, understands, and agrees to its contents and realizes the penalties for non-compliance to its terms.

The Sparks Police Department collects confidential and personal information from the public to administer the various programs for which it has responsibility; Sparks Police Department is committed to protect this information from unauthorized access, use, or disclosure. The following policies and regulations have been adopted to address volunteers' responsibilities for handling and protecting information obtained from the Sparks Police Department Criminal Data System (CDS), National Crime Information Center (NCIC)/Nevada Criminal Justice Information System (NCJIS) or any information gathered within the duties of a Sparks Police Department employee. I understand the following are my responsibilities.

1. As an Explorer, you maybe exposed to information an employee gained access to when accomplishing the responsibilities of their employment. This information may come from the Sparks Police Department CDS, NCIC/NCJIS or through personal interviews of victims/witness'/suspects. You may not access or use information from the Sparks Police Department for personal reasons. (Examples of inappropriate access or misuse of Sparks Police Department and NCIC/NCJIS include, but not limited to: accessing personal inquires or processing transactions on your own records or those of your friends or relatives; accessing information about another person, including locating their residence address, for any reason not related to your explorer job responsibilities.)
2. You may disclose Sparks Police Department and NCIC/NCJIS information ONLY to Sparks Police Department employees involved in criminal investigations. Requesters of information must complete an appropriate form through the Records Section of the Sparks Police Department to obtain criminal history records checks or copies of cases.
3. You will not request information using a computer on which another employee is logged on.
4. You will not acknowledge the existence or lack of a criminal history record or warrant to any person, group or organization not authorized access to this information. You will insure that the computer screen cannot be observed by any person not authorized access to criminal justice information.

I have read and understand the security/confidentiality policies and regulations stated above. I understand that failure to comply with these policies and regulations may result in civil and/or criminal prosecution in accordance with applicable statues against me, and that I may be subject to disciplinary action from the Sparks Police Department Explorer Advisors up to and including termination.

DATE	EXPLORER NAME (Print)	EXPLORER SIGNATURE
_____	_____	_____
DATE	EXPLORER ADVISOR NAME (Print)	ADVISOR SIGNATURE
_____	_____	_____

Parent/Guardian signature required if Explorer is under the age of 18 and/or not emancipated

DATE	PARENT/GUARDIAN (Print)	PARENT/GUARDIAN SIGNATURE
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