

**16.03-B Security Camera Training and Acknowledgment Form** *(See Rule 16.03 fka 2.69)*

This Form is intended to define the responsibilities of those employees handling surveillance devices and related information, which are considered NMSU records that could contain sensitive or confidential information about students, employees, donors or other individuals, and to record his or her recognition and acceptance of that responsibility.

New Mexico State University maintains the confidentiality and security of records in compliance with the Family Educational Rights and Privacy Act of 1974 (FERPA), the Health Insurance Portability and Accountability Act (HIPAA) and the Gramm-Leach-Bliley Act (GLBA), in addition to other federal and state laws. These laws pertain to the security and privacy of personal academic, medical and financial information, along with identifying information such as social security numbers, names and photographs (surveillance recordings could reveal/contain identifying information).

Within NMSU, employees are authorized access to university records only to the extent necessary to perform their official university duties, and are responsible for protecting such information against unauthorized access or disclosure.

Employee: Recognizing this responsibility, I agree to the following (please initial each line):

\_\_\_\_\_ I will access university records only as required to perform my assigned duties.

\_\_\_\_\_ I will store information under secure conditions and make every effort to ensure individual's privacy.

\_\_\_\_\_ I will not divulge, copy, release, sell, loan, review, alter or destroy records except as properly authorized by the appropriate university official within the scope of applicable state or federal laws, record retention schedules and internal policies.

\_\_\_\_\_ I will forward all requests for information via an open records request to the university's general counsel for guidance. I will not release information covered by these requests until instructed to by university's general counsel or my supervisor.

\_\_\_\_\_ I will not release information about students, staff or employees that was requested on the basis of non-public information (for example – recordings, verbal talk, etc.)

\_\_\_\_\_ I have read the NMSU Security Camera Rules and Procedures and agree to comply with its provisions.

I understand that failure to comply may result in disciplinary action, including termination of employment.

Employee Printed Name \_\_\_\_\_  
Employee Signature: \_\_\_\_\_ Date : \_\_\_\_\_