

**U.S. DISTRICT COURT – DISTRICT OF OREGON
PORTLAND REENTRY COURT PROGRAM
CONFIDENTIALITY AGREEMENT FOR COURT OBSERVERS**

I, _____ understand that I am an invited guest of the Portland Reentry Court Program for the purpose of observing the Court’s process and procedures. I understand that the staffings are confidential and that information about the Reentry Court participants and treatment provider records will be discussed and that these records are used for the purpose of assessing the needs of the reentry court participants, creating treatment plans, and monitoring participation.

I further understand that I may hear information that is highly sensitive and legally protected under Federal Rule 42 CRF, Part 2.

I understand that unauthorized release of this information is punishable as a criminal offense. I agree to keep all information about the reentry court cases, strictly confidential at all times, even after termination of my observation of the reentry court proceedings.

Signature Date

Witness Date

Date of observation: _____