

## CONFLICT OF INTEREST

I will at all times keep the interests of the clients we serve as my foremost concern. I will not act to circumvent the policies of my employer, EPHC. In particular, I will follow the established protocols concerning client information, records, treatments, and inquiries.

I recognize that all client information is confidential and I will make every effort to uphold the privacy of client information. I accept personal responsibility for any client information I disseminate contrary to the protocols of the Company including, but not limited to, dissemination for personal gain.

I acknowledge that EPHC is engaged, among other things, in the business of providing health care services. Each of these services involves the use of propriety techniques and technology developed by the Company. At all times during my employment and for a period of one hundred eighty (180) days after my employment terminates, voluntary or involuntary, I agree to not directly or indirectly use, disclose or disseminate to any other person or organization or entity all Company proprietary techniques and technology of which I have knowledge.

While employed by EPHC. I will refrain from being an owner, agent or to have any financial interest, either directly or indirectly, in any other business activity which covers services that are directly competitive with EPHC provided, however, that I may own shares in any publicly traded company.

Upon my termination of employment, I will return to EPHC. All notes, records, files or documentation, whether made or compiled by me, pertaining to propriety information of EPHC.

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Signature of Applicant

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Date

## COMPUTER KEY/PASSWORD STATEMENT

The Agency will maintain confidentiality and security of patient data that is entered into and stored on computer systems.

**I understand the need and responsibility to maintain a high level of security with computer access. I will not allow anyone to use my computer key/password and accept full responsibility for the security of my computer key/password.**

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Signature of Applicant

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Date