



San Diego County Office of Education Main Campus
6401 Linda Vista Road, San Diego, CA 92117
858-292-3500 | www.sdcoe.net

Legacy Info Account Request Form

This form is used to request an account that will enable the user to access sensitive historical payroll and/or finance data. This form must be completed in full and signed by the chief business officer of the district.

Email the completed form to jvaillancourt@sdcoe.net

Confidentiality Agreement

This Confidentiality Agreement (the “Agreement”) is executed the date signed below and relates to the confidentiality of certain non-public proprietary or other confidential information that the Employee (the “Signatory” or “User”) may have access to on legacyinfo.sdcoe.net.

By executing this Agreement, Signatory hereby expressly acknowledges and agrees to the following terms and conditions in consideration of Signatory’s participation in the use of legacyinfo.sdcoe.net and potential access to confidential non-public and/or proprietary information:

1. All non-public information, documentation, and data produced by reports on [Legacyinfo.sdcoe.net](http://legacyinfo.sdcoe.net) constitutes “Confidential Information” for purposes of this Agreement. The Signatory shall only use the Confidential Information if it is produced from their own Local Educational Agency as approved by their organization.
2. The Signatory’s use of legacyinfo.sdcoe.net may result in access to other school districts’ data which may be confidential non-public and/or proprietary. In the event that this should occur, the Signatory should notify John Vaillancourt, Senior Director, Information Technology so that further security can be put in place.
3. The Signatory shall not disclose any Confidential Information to any other person or organization.



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5. Signatory also agrees to indemnify, defend and hold harmless SDCSS from any and all liabilities or claims made by other individuals or entities as a result of any improper disclosure and/or use of Confidential Information, except for those claims arising from the sole negligence or sole willful conduct of SDCSS, its affiliated organizations, officers, employees, or other representatives.

6. The district shall notify John Vaillancourt if the employee separates from the district or changes job duties where access the legacyinfo.sdcoe.net is no longer required.

Signatory Statement (Check the box below.)

I hereby certify that I have carefully read this document, and I fully understand its content. I am aware that this is a contract between myself and SDCSS and/or its affiliated organizations and sign it of my own free will.

District Name		
I need access to? (Please check) Payroll Data <input type="checkbox"/> Finance Data <input type="checkbox"/>	Employee ID:	
Employee Work Phone	Employee Work Email	
Employee Name	Employee Signature	Date