

# West Virginia MACC Access Request and Confidentiality Agreement

Complete all information. Illegible, altered, obsolete, or substituted forms will not be processed. Send this completed agreement to:

Mail    MACC Administrator  
          PO Box 428  
          Charleston, West Virginia 25322-0428

Fax     (304) 558-1343

Name (First / MI / Last): \_\_\_\_\_

Office of Assignment: \_\_\_\_\_  
(Appropriate WorkForce West Virginia Career Center, WIB, Grantee, etc.)

Site Address: \_\_\_\_\_

City, State, Zip, County: \_\_\_\_\_

Primary Phone #: (\_\_\_\_) \_\_\_\_\_ (ext) \_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_

E-Mail Address (*Required*): \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

WorkForce Employee:     Yes     No

**Privacy and Confidential Information:** The privacy of individuals in the State of West Virginia is a fundamental right that must be safeguarded. West Virginia Code, Chapter 61, Article 3C (the "West Virginia Computer Crime and Abuse Act") states in part that any person who knowingly, willfully and without authorization, accesses or causes to be accessed any information filed by any person with the state which is required by law to be kept confidential shall be guilty of a misdemeanor. It is important that those given access to confidential information in the WV MACC system access only the data required to accomplish official duties, and that every precaution be taken to avoid any breach of privacy of any client, employer, or employee whose information is contained in the WV MACC system.

**Agreement:** In consideration of the trust placed in me to receive access to the WV MACC system and the data contained therein for the purpose of conducting my prescribed job duties, I agree as follows:

1. To regard WV MACC electronic data and/or related manually maintained records on individual persons, employers, and other systems as confidential in nature, to be held in trust, and to protect such data and systems against unauthorized disclosure and/or use;
2. To withhold confidential data from persons, including but not limited to relatives, friends, etc., not accorded access to confidential data to which I receive access by virtue of my position and job duties;
3. To not permit private or personal dealings to corrupt or adversely influence the quality, quantity or integrity of advice or service that I provide due to knowledge obtained from WV MACC data;
4. To not be involved in any way with the processing of personal claims or claims of relatives and friends;
5. To be responsible for the safeguarding of computer accounts and passwords assigned to me for access to the West Virginia MACC system, including refraining from sharing such information with others;
6. That I understand that the Code of West Virginia, as amended, provides penalties for unlawful release of privileged or confidential information, and that, depending on the severity of the breach of confidentiality actions could be taken against me that include but are not limited to denial of continued access to the system, civil action, or criminal prosecution.

By signing this document, I acknowledge that I have read and understand the above information, have had ample opportunity to ask any questions I may have regarding this Agreement, and assent to the terms of this Agreement.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)

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## Authorized Programs & Activities:

I authorize the applicant to assign the following programs and services:

\_\_\_ **WIOA:**  Adult  Youth  Dislocated Worker

\_\_\_ **Wagner-Peyser:**

\_\_\_ Assessments:  Add/Modify  View Only

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\_\_\_ Business Consultant Group

\_\_\_ Rapid Response

\_\_\_ **TAA:**  Main Office  Case Manager

\_\_\_ Business Services Group

\_\_\_ **NDWG:**  Main Office  Grantee

\_\_\_ **Veterans:**  LVER  DVOP

Grant: \_\_\_\_\_

\_\_\_ **SNAP E&T**

\_\_\_ **Other** \_\_\_\_\_

\_\_\_ **Job Seekers only, no programs**

\_\_\_\_\_  
(Authorizing Signature – LWIB Director, Agency Head, etc.)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Please Print Authorizing Signature Above)

**Please keep a copy of this agreement for your records!**