

_____ PTA
Nominating Committee Confidentiality Agreement

I hereby acknowledge by my signature below that any information either presented or discussed during the meetings of the _____ PTA Nominating Committee will not be divulged by me outside the meetings or with any individual not a member of this committee.

Furthermore, I acknowledge that a violation of this agreement shall result in my removal from the committee.

Printed Name: _____

Signature: _____

Date: _____