

(CRB 9)

**CRB CONFIDENTIALITY AGREEMENT
FOR ALL STAFF HANDLING CRB DISCLOSURES AND WITH ACCESS TO
CSAS CRB NATIONAL DATABASE**

I hereby confirm that I will adhere to the CSAS confidentiality policy in respect to the processing of CRB Disclosure Applications.

Signed _____

Name _____ (please print)

Diocese/Religious Order _____

Date _____

The original form once completed must be sent to CSAS