

2 – 21 School Volunteers

Exhibit I OATH OF CONFIDENTIALITY

I,		(Name of Volunteer Taking Oath)
, <u> </u>		(Name of Volunteer Taking Oath)
do solemnly	swear (affirm) that I	will NOT communicate to any person any information obtained in the
course of do	oing volunteer work w	ith Chinook's Edge School Division No. 73.
SWORN (A	AFFIRMED) before m	e at the
		of
in the Provi	nce of Alberta	
this	day of	A.D. 20
	(Witness)	(Signature of Person Taking Oath)