# INADVERTENT DISCLOSURE OATH

For use of this form, see AR 380-381; the proponent agency is OCSA

I certify that I shall never divulge the classified information inadvertently exposed to me and I will not reveal to any person my knowledge of the existence of such information. I understand that transmission or revelation of this information in any manner to an unauthorized person may be punishable under U.S. Code, Title 18, Sections 793 and 794 and/or appropriate articles of the Uniform Code of Military Justice. I further certify that I shall never attempt to gain unauthorized access to such information. My signature below does not constitute an indoctrination into the program or clearance for the program, but acknowledges my understanding of the above.

_____

*(Signature)*        *(Date)*

WITNESSING OFFICIAL:

_____      _____

*(Signature)*     *(Date)*        *(Printed Name)*

_____      _____

*(Printed Name)*        *(SSN)*

_____      _____

*(Position/Organization)*        *(Organization/Telephone Number/Position)*