

Acceptable Use Agreement

I, _____ acknowledge I am being granted use of state information assets in order to carry out my work and agree that my use of such assets will be conducted in a manner that ensures compliance with this Policy, Policy 107-01-010, and Policy 107-001-015 and by Oregon Accounting Manual Policy 40.10.00 PO and by Statewide Policy 107-001-016, Mobile Communication Device Usage While Driving.

I agree that any personal use of any provided Mobile Communication Device, will be identified on a monthly basis, and reimbursed to the agency through Payroll Deductions. I further understand that any personal use is also subject to taxation of the user.

I understand my usage will be monitored, without further warning, and that inappropriate usage may be cause for disciplinary action, including but not limited to reprimand, suspension, and termination of employment or Civil or criminal prosecution under federal and state law.

I understand that I must use a hands-free accessory when driving a motor vehicle while using a Mobile Communication Device, except where exclusions apply. Any traffic violations or payment of fines imposed for violation of any applicable laws are my personal responsibility.

I understand that the use of state information assets may be revoked at any time without further warning.

I acknowledge, I have read and understood this document by signing below. I further understand it is my responsibility to seek advice regarding any questions I might have regarding this document or policy prior to my signing.

_____ Employee Signature	_____ Witness (Manager) Signature	_____ Date
_____ Print Name	_____ Print Name	_____ Date