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| 1. **CONDITIONS** – Please read first.    1. You agree to take reasonable precautions in the care and security of the assigned computer device(s) at all times (within schools, the Education Centre and away from Board-owned premises.)    2. You agree to secure all data and information on your device(s) by maintaining password protection and encryption protocols as defined by RVS AP179 – Information Security Policy.    3. Any divisionally assigned device(s) must be returned to the Education Centre, IT Services if you leave the employ of Rocky View Schools or go on leave for more than 4 weeks. If you are transferring to another school within the jurisdiction, the divisionally assigned laptop will accompany you.    4. Any school/department assigned devices (Desktop, iPad, Chromebook, etc) must be returned to the school Principal or department Supervisor, if you leave the employ of Rocky View Schools or go on leave for more than 4 weeks.    5. You are required to maintain a malware/virus solution on Windows and Mac Based Operating Systems.    6. The Acceptable Use Policy describes staff responsibilities for the use of devices whether on or off board premises.    7. The Acceptable Use Policy describes staff responsibilities for the management and safekeeping of information stored on RVS devices by ensuring adequate security preventing unauthorized access, collection, use, disclosure and/or disposal of information.    8. RVS employees are held responsible for exercising all reasonable care to prevent abuse to, excessive wear of, or loss of Board-owned equipment or material entrusted to their care.    9. RVS will maintain these devices for any reasonable damage. When negligence is evident in the care of the device or its inappropriate use, cancellation of use privileges will occur. The cost for repair or replacement with be incurred by the user.    10. Principals or supervisors must be notified by you immediately if the computer is lost, stolen or damaged. |
| 1. **STAFF AGREEMENT**   I understand that I am responsible for the device(s) specified in this Agreement at all times and agree to the above conditions.   |  |  | | --- | --- | | Staff Name: |  | | Location Name: |  |   **I ACKNOWLEDGE RECEIVING THE FOLLOWING DEVICE(S) IN GOOD WORKING CONDITION:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Device Make: |  | Model: |  | Replacement Value: |  |  |  |  | | --- | --- | | Serial Number: |  |  |  |  |  | | --- | --- | --- | |  |  |  | | Staff Signature |  | Date: (mm/dd/yyyy) | |

[Please upload completed form to the associated service ticket](https://techservices.rockyview.ab.ca/TDClient/139/Portal/Home/)

*Reference:* RVS AP147 Use of RVS Computer Devices