



## Employee Agreement Concerning the Use of University-Owned Cell Phones and PDAs

Employee Name (Print): \_\_\_\_\_

Employee UVA Email: \_\_\_\_\_

Employee Work Phone: \_\_\_\_\_

Employee Title: \_\_\_\_\_

UVA Department/Unit: \_\_\_\_\_

- I certify that I am the recipient of the following University-provided cell phone or PDA equipment:

\_\_\_\_\_

\*\* Please include model and serial number, if applicable.

- I agree that the equipment and related services are to be acquired and used for the efficient conduct of official University business, with only incidental personal use that incurs no expense to the institution.
- I further understand that I am responsible for safeguarding the equipment and services and controlling its use. If a cell phone is mislaid or stolen, I will immediately report the loss or theft of such equipment to my department. I will operate vehicles and potentially hazardous equipment in a safe and prudent manner, and therefore, will refrain from using communication devices while operating such vehicles and equipment unless in an emergency situation.
- If the University determines that there is no longer a business need for me to possess such equipment, I will return the equipment. Likewise, if I separate from University employment, I will promptly return the equipment to my department.
- I understand that all records related to the purchase, use, and disposition of this University- owned equipment and services, including cell phone statements and text messages, are the property of the University and potentially subject to disclosure.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**RETAIN COMPLETED FORM IN EMPLOYING DEPARTMENT FOR AUDIT PURPOSES**