

HIDALGO COUNTY
INFORMATION TECHNOLOGY DEPARTMENT

ACCEPTABLE USE POLICY
ACKNOWLEDGMENT FORM

EMPLOYEE NAME:

SLOT NUMBER:

DEPARTMENT NAME:

DEPARTMENT NUMBER:

DATE:

This Acknowledgement is for the purposes of the above named employee to acknowledge that he/she has read and understands the Hidalgo County's Information Resources (IR) that encompass computer equipment, phone, network infrastructure, data, mobile access, mobile devices, wireless connectivity, copier multifunctional devices and related peripheral devices and any other technological equipment provided by the County to support the services provided to Hidalgo County constituents. The use of Hidalgo County's IR is not a right and any violation to of Acceptable Use may be cause for disciplinary action up to and including termination. All activity of the Hidalgo County IR is subject to monitoring at all times, notice or warning will not be provided. This policy must be signed by all users and will be placed in their personnel file.

I have read and understand this acknowledgement, and understand the Acceptable Use Policy.

Signature-Employee

Date