

## 609-1a\_VSCS\_Issued\_Mobile\_Device\_Agreement\_Form

I agree to the terms of usage as outlined in the VSCS Mobile Device Policy 609-1.

I acknowledge that I have read the above policy and agree that if I do not honor the terms outlined that I may be subject to disciplinary action as well as confiscation of this device.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

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

IT Department Signature \_\_\_\_\_ Date \_\_\_\_\_

Device type \_\_\_\_\_ Brand \_\_\_\_\_ Model \_\_\_\_\_

Serial number \_\_\_\_\_