

Miller Place Union Free School District
Miller Place, New York 11764
Board of Education Policy

3410.F

MOBILE DEVICE FORM

Pursuant to Policy # 3410 and Regulation #3410.R, _____ is being assigned a District-owned mobile devices.

I have read Policy #3410 and Regulation #3410.R and I agree to comply with such requirements. I certify that I will **not use** the assigned mobile devices, or any other District owned mobile devices, to make or receive calls of a non-business nature, except in the case of an emergency.

Name of Employee

Date

Superintendent's (or Designee) Signature

Date

For Use by Technology Department:

Telephone Number: _____

Date Assigned: _____

Serial (ESN) Number: _____

Type of Device: _____

Signature of Technology Department: _____

Date Returned: _____

Reason: _____

Employee's Signature

Date

Signature of Technology Department:

Date

Adopted: 02/09/2005

Reviewed: 10/19/2005 09/30/2009 10/28/2015 11/17/2021

Revised: 10/24/2007 10/28/2009 11/18/2015 12/08/2021