STANWOOD-CAMANO
SCHOOL DISTRICT

Cellular #:

Issued To:

Plan

# ***Cellular Device***
# ***Acceptable Use Agreement***

District cellular devices and service plans have been authorized for the efficient business operation of the District and/or for use during emergencies. The purchase of District-owned cellular equipment and associated services shall be coordinated through the Technology Department.

**The undersigned agrees with the following terms and conditions:**

- I understand that no personal calls/texts will be placed or received on a District paid device/service. I will avoid issuing the telephone number to individuals who may use it for personal reasons.
- I will adhere to the requirements defined in Board Policy 6250.
- I understand that accidental or emergency personal use of a District paid device/service must be promptly reimbursed to the District for all calls/texts/data in excess of the contract amount. This applies to both incoming and outgoing use.
- I understand that I may receive a copy of the cellular bill to review if I have exceeded my plan service limits or if unusual or inconsistent use is noted. I will review the bill to ensure accuracy and reimburse the District promptly, if applicable.
- I understand that the cellular device and associated accessories are District property assigned to me for District business. I am personally responsible for its care and security at all times. I may be held liable for damage or loss while it is in my care.
- I am responsible for returning the device and accessories, if applicable, to the District upon request or when I no longer need the items for my District responsibilities.
- I will avoid use of additional calls/texts/data charges or other services that increase operational costs.
- I will make efforts to avoid use by unauthorized users.
- I will avoid use of the cellular device while operating a vehicle or other machinery.
- I understand the use of district technology, including cellular devices, to conduct and communicate district business via email, district social media, and text are all subject to the Washington Public Records Act.

_____

Employee Signature Date

_____

Budget Authority Date

_____

Budget Account Code

*Send original form to Admin Office ~AP Lisa. Then Lisa will be forwarded to HR and Fiscal.*

09/2022