



Acknowledgement of Business Usage Form for a Travis County-issued Wireless Device

By signing below, the named Travis County employee acknowledges that they are fully aware of the Travis County Wireless Communications Policy and what specifically constitutes County business usage. "Official Use" means County business which relates to the official duties that are assigned to me by my superior, or, Official as defined in section 39.002 (g & h). I further acknowledge that I have read and understand the specific sections to the policy as referenced in the below paragraph and will limit my Personal Use to the following exceptions:

- (1) one very brief call to inform a family member for each event when the employee is required to work beyond scheduled work hours and is in an isolated location where other communications services are not available, or
- (2) calls made in isolated incidences when there are important, urgent circumstances that cannot be dealt with by other forms of communications, such as cases of clearly life-threatening or safety related situations.

Wireless Communications Technologies, as defined by section 39.002 (l), are intended to further the mission of insuring that Travis County meets its responsibilities to its taxpayers. These technologies represent a component of business records and as such, have the same effect as written communication in other formats (sec. 39.004). The County reserves the right to monitor (sec. 39.005), and review the content of electronic communications especially in situations involving overages. If there are situations involving an overage charge as compared to the bundled rate, the employee may be required to reimburse the County for this overage amount. Personal usage should be limited to those situations defined by section 39.002 (i).

In accordance with Travis County Code's Chapter 39 Wireless Communications Policy by my signature, I am agreeing that I have read and understood this policy and acknowledge that my Travis County issued wireless device will be used for Official Use only. This signed form must be returned to the providing department prior to issuance of the device.

Signature of Wireless Device recipient

Date

Printed Name

Employee Number

Supervisor Signature

Date