

Smartphone User Agreement

Equipment - I agree that this equipment is to be used for official UNIVERSITY OF WINNIPEG business and that any personal use will be incidental and that I will reimburse my department for any personal use of this equipment that results in noticeable incremental costs to the University. I will exercise appropriate care and caution when using the equipment. I understand that all records related to the purchase, use, and disposition of this University owned equipment, including cell phone statements, are the property of THE UNIVERSITY OF WINNIPEG and potentially subject to disclosure under the Public Records Act. I further understand that I am responsible for safeguarding the equipment, including any data and controlling its use. If THE UNIVERSITY OF WINNIPEG determines that there is no longer a business need for me to possess such equipment, I will return the equipment. If I separate from THE UNIVERSITY OF WINNIPEG employment, I will promptly return the equipment and accessories to TSC (Technology Solutions Centre) unless other arrangements have been made with Manager/Supervisor/Director.

Services - I agree that this service is to be used for official UNIVERSITY OF WINNIPEG business and that any personal use will be incidental and that I will reimburse my department for any personal use of this equipment that results in noticeable incremental costs to the University. I understand that all records related to the University provided service, are the property of THE UNIVERSITY OF WINNIPEG and potentially subject to disclosure under the Public Records Act. I further understand that if THE UNIVERSITY OF WINNIPEG determines there is no longer a significant business need for me to utilize this service, THE UNIVERSITY OF WINNIPEG will discontinue its funding of the service. If I separate from THE UNIVERSITY OF WINNIPEG employment, the service will no longer be paid for or reimbursed by the University.

By signing this agreement, I verify that I am using this equipment/service for official UNIVERSITY OF WINNIPEG business:

Name: _____ Title: _____ Extension: _____

Signature: _____ Date: _____

Department Head Name: _____ Extension: _____

Signature: _____ Date: _____