



Learning with Purpose

Document Name:	Mobile Device Acceptance Form
Policy Number:	N/A
Effective As Of:	March 2016
Next Review Date:	March 2017
Responsible Office:	Information Technology
Responsible Position:	Information Security Officer

I accept and understand that mobile devices and/or accessories provided for my use are the property of the University of Massachusetts. I agree to abide by the terms of the UMass Lowell Mobile Device Policy (<http://www.uml.edu/IT/Policies>).

It is the policy of the University of Massachusetts Lowell that when an employee terminates employment the mobile device is left with the employee's supervisor/manager or HR representative for proper dispositioning with Information Technology.

I accept and understand that I will be held responsible for the loss of the mobile device while in my possession. I will immediately notify Information Security in the event of loss or theft, and will immediately file a police report with the University Police.

I accept and understand that Information Technology reserves the right enforce the security settings as stated in the Mobile Device Policy, and to wipe (erase) the data on the mobile device in the event of loss or theft.

I understand that a violation of the terms and conditions set out in the UMass Lowell Mobile Device Policy may result in the restriction and/or termination of my use of University issued mobile devices, equipment, and/or accessories and may result in further discipline up to and including termination of employment and/or other legal action.

Employee Printed Name: _____

Date: _____

Employee Signature: _____