



Valley School District

Employee-Owned Cellular Telephone and Mobile Access Device Usage Agreement

Employee Name: _____ Date: _____

Program/School: _____ Department: _____

Position Title: _____ Supervisor: _____

EMPLOYEE-OWNED DEVICE INFO

Service Co.: _____ Phone Number: _____

Reason cell phone use/service is necessary: _____

CONDITIONS OF USE

1. In return for receiving a stipend to support personal cell phone usage and service, the undersigned is required to have readily available his/her cell phone for purposes related to the conduct of Valley School District business. The cell phone must be turned on and the employee reachable at the above-listed phone number at all times appropriate to his/her position duties and responsibilities.
2. Use of this device/equipment will be in full compliance with district policies and procedures.
3. The district is not responsible for loss or damage to personally-owned cell phones or other personally-owned mobile access devices and accessories.
4. The cellular phone stipend to the employee must be approved annually by the Superintendent or his/her designee.

I accept and agree to the conditions of use of my personal mobile device and related equipment, and have received and reviewed a copy of Policy #6250 and Procedure #6250P1.

Employee Signature: _____ Date: _____

I approve the employee's request for use of his/her personally-owned mobile device, which usage and stipend has been reviewed and deemed appropriate and necessary for the conduct of district business.

Supt./Designee Signature: _____ Date: _____