HARDWARE AND SOFTWARE AGREEMENT

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**Staff/Volunteer Name Organization Location**

Work Phone #\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Cell Phone # \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Planned Roll-off Date (if contractor): \_\_\_\_/\_\_\_\_/\_\_\_\_

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| PC / Laptop Serial #: Make/Model:  | The organization prohibits the copying or use unlicensed software on any organization issued device (“device”). I will not copy/install any software not authorized for use on my assigned device; and I will not attempt to copy/install any software on the organization’s network without the organization’s approval.I acknowledge that certain applications developed by the organization are it’s confidential property, and I will not disclose them to third parties or any other unauthorized personnel.I will protect the confidentiality of the organization network and email passwords. I will not give my passwords to anyone except organization staff when necessary; and, as a matter of security policy, I will be sure to change my passwords should I ever have the need to disclose them to anyone. I will not post my passwords anywhere in my work area (i.e.: taped to the desktop/laptop). I will log out when ever I leave the office.I am responsible for the safekeeping of my desktop/laptop and peripherals (as well as any other organization equipment in my possession). If an item is stolen, we need a police report in order to submit an insurance claim.In the event my device is stolen, I will immediately work with with organization staff to file police report in the jurisdiction where the theft occurred. I agree that if my employment/engagement with the organization terminates, I will return my assigned PC/laptop and all other assigned equipment to the organization prior to during my exit interview.  |
| Please take a moment to go over all peripherals with the XYZ Organization (aka, the “organization”) representative to ensure that you are receiving all the specified below. Received Returned **[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Carrying Case**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Port Replicator/Docking Station **[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** A/C Adapter/Power Cord**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** CD/DVD ROM (\_\_External/\_\_Internal)**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Lock. Cable & Key(s)**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Monitor(s) S/N(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_/Model\_\_\_\_\_\_\_\_\_\_)**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Input Device(s) (\_\_Keyboard/\_\_Mouse)**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Speakers**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Flash Memory Stick**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Projector**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Printer**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Cell phone**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Wireless hotspot**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**[ ]  \_\_\_\_\_\_\_ \_\_\_\_\_\_\_** Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Notes: |
| Terms and ConditionsBy signing this agreement I understand that I am taking responsibility for the equipment listed above and I will take all necessary steps to physically secure the computer and confidential information at all times. At no time am I allowed to trade or give this equipment to any party without written approval from the organization. I also understand that a violation of this agreement may subject me to disciplinary action in accordance with organization personnel policies.  |

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Equipment Issue: Staff/Volunteer Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Equipment Issue: Organization rep Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Equipment Return: Staff/Volunteer Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Equipment Return: Organization rep Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_