

**ACCEPTABLE USE
ACKNOWLEDGEMENT FORM**

I acknowledge that I have read and understand, and will comply with the Department of General Services' *Acceptable Usage Policy, Acceptable Use Standards and Acceptable Use Procedures* governing my use of the Department's information assets and resources.

I understand that the consequences for non-compliance may include, but are not limited to, disciplinary action up to and including termination of employment.

PRINTED NAME	PHONE NUMBER
SIGNATURE	DATE
DIVISION	OFFICE/BRANCH

Note: Branch/Office Chiefs will forward the original Acknowledgement Form to the Office of Human Resources to be filed in the Official Personnel File, or other appropriate file in the case of DGS contractors and authorized third party individuals.