

The University of North Carolina Asheville

Computing & Network Usage Agreement -- Contract, Non-Agency Personnel, Volunteers, Vendors, and Guests

University Unit: _____

Applicant Information

Name: _____ (please print)

Address: _____

- Category: Contract, Non-Agency Personnel
 Volunteer
 Vendor Vendor name: _____
 Guest

Email: _____

In the interest of offering my voluntary efforts in support of the University of North Carolina Asheville, I have read the University's Computing & Network Usage policy and agree to follow University policies and procedures with respect to computing and network use. The University has drawn my attention to the following in particular:

A. The University may monitor my use of computing equipment and its networks and systems for the following purposes:

1. a. To ensure the security and operating performance of its systems and networks
2. b. To enforce University policies.

B. I have no expectation of privacy in the material sent or received over the University computing systems or networks. While general content review will not be undertaken, monitoring of this material may occur for the reasons specified above.

C. All material prepared and utilized for work purposes and posted to or sent over University computing and other telecommunicating equipment, systems or networks must be accurate and must correctly identify the creator and receiver of such.

D. I will not use user names or passwords provided by other employees or volunteers nor will I offer my user name or password to others. Passwords may NOT be shared.

E. I will treat all information on University systems or in University databases as confidential.

Applicant signature: _____

Date: _____

(STAFF USE ONLY)

Access required:

TYPE (please check)	BRIEF JUSTIFICATION
Email	
OnePort	
Banner	
Other	

Start Date: _____

Expiration Date (no more than 6 months): _____

Unit director/manager name: _____ (please print)

Unit director/manager signature: _____

Date: _____

Vice Chancellor name: _____ (please print)

Vice Chancellor signature: _____

Date: _____

Please forward to an Information Technology Security Officer upon completion.