

**MOBILE DEVICE ACCESS AGREEMENT**

**I. EMPLOYEE**

By signing below I am requesting to use my personal mobile device to access DDSN data including, but not limited to, agency email. I agree to abide by the procedures and requirements of the DDSN Mobile Device Security Policy & DDSN Access Control Policy.

I understand that the policy includes, but is not limited to, the following:

- I agree that the physical security of the device is my responsibility and I will keep it in my physical possession whenever possible and store it in a secure place when it is not in my possession.
- I agree to notify the DDSN IT Division before the mobile device is disposed, sold, surrendered to a mobile provider, or otherwise deactivated and allow IT personnel to remove sensitive and confidential information from the mobile device.
- I agree to notify the DDSN IT Division immediately if my device becomes lost or stolen.
- I grant DDSN the right to install the DDSN mobile device management agent on my device.
- I grant DDSN the right to remotely wipe or erase data from my device should it be deemed necessary in order to protect the security and privacy of DDSN data. This may include loss of personal data stored on the device.
- I am aware that the use of this software is at my own risk, DDSN is not responsible for non-functioning or bricked devices, non-working SD cards, batteries or warranty void.

\_\_\_\_\_  
Print Employee Name

\_\_\_\_\_  
Signature

**II. MANAGER**

I certify that the above signed employee has a valid business need to access DDSN data using a mobile device.

\_\_\_\_\_  
Print Manager Name

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Please return this form to: Dexter Alston, Information Security Officer by email at [dalston@ddsn.sc.gov](mailto:dalston@ddsn.sc.gov) or by fax to (803) 898-9658