

## River Valley Child Development Services

### Personal Devices Used for Work Responsibility and Use Agreement

By signing this form, the undersigned acknowledges full responsibility for all information listed. The undersigned agrees to waive any right to litigate an inadequate training claim or other negligence against River Valley Child Development Services for not understanding this procedure.

|                            |       |
|----------------------------|-------|
| Name:                      | Date: |
| Program:                   |       |
| Program Director/Designee: |       |

#### Requirements for Use:

(Initial)

\_\_\_\_\_ I agree to comply with the personal devices used for work policy.

\_\_\_\_\_ I acknowledge that I have received training regarding the personal devices used for work policy.

#### List of Personal Devices (check all that apply)

| Cell Phone | Laptop | Hotspot | Tablet |
|------------|--------|---------|--------|
|            |        |         |        |

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_