

As a user of Commonwealth of Virginia (COV) and Virginia Department of Professional & Occupational Regulation (DPOR) information systems/data, I understand I have the responsibility for safeguarding resources from unauthorized use, intrusion, destruction, or theft. I agree to abide by all applicable federal, state, COV or DPOR laws, policies and standards which govern my access to and use of the information and computer systems of the COV and DPOR. Information and computer systems include, but are not limited to, the information/data (in any format), computer(s) including personally owned devices used to conduct Commonwealth business, computer network, all computers/devices/peripherals connected to the network or being used to transact Commonwealth business, and all devices and storage media.

Access has been granted to me by DPOR as a necessary privilege to perform my authorized job functions. Passwords, authenticators, and logon IDs shall not be shared or divulged. I am prohibited from using or knowingly permitting use of any assigned or entrusted access control mechanisms for any purposes other than those required to perform my authorized employment functions. I agree to change passwords immediately if they are compromised.

If, due to my authorized job functions, I require access to information on COV or DPOR information systems I must obtain authorized access to that information from the system/data owner and present access documentation to the account administrator.

I will not disclose any confidential, restricted, or sensitive data to unauthorized persons during or after my employment with DPOR. I will not disclose information concerning any access control mechanism of which I have knowledge unless properly authorized to do so. I will not use access information or systems which have not been expressly assigned to me. I will not use COV/DPOR information or systems for personal, commercial, or partisan political purposes. I will report any infractions, or suspected infractions to the DPOR ISO immediately for investigation and subsequent action.

I am responsible for understanding and adhering to the requirements set forth in DPOR and Commonwealth policies and standards, including but not limited to, **DPOR Acceptable Use Policy (400-06)**. I am required to take the appropriate Information Security Awareness Training prior to (or as soon as practicable: not more than 30-days after start date) being provided access to the information system, and annually thereafter. Failure to comply with this requirement will result in termination of my access to the information system.

I agree to abide by all applicable Federal and State laws or code; as well as COV and DPOR policies, procedures and standards which relate to the use of information systems, equipment, security procedures and the data contained therein. Unauthorized or improper use or access of these systems may result in administrative disciplinary action under the DHRM Standards of Conduct Policy 1.60, legal/criminal penalties, or civil actions.

I understand and consent to the following: I have no reasonable expectation of privacy when I use COV systems or access such systems from any device, personal or otherwise; including any computer, communications or data transiting or stored on personal or COV assets. Personal devices such as smartphones used to transact COV business shall be configured and maintained using mobile device management as required by Commonwealth Standards. At any time, and for any administrative agency or lawful government purpose, the agency/government may, without notice, monitor, intercept, and search/seize any communication or data transiting or stored on this system. As such, I give consent to the monitoring of activities on COV and DPOR information systems, and other systems accessed through these. If such monitoring reveals evidence of unauthorized activity, it may be provided to administrative or law enforcement officials for disciplinary action and/or prosecution.

By signing this agreement, I certify that I understand the preceding terms and provisions and that I accept the responsibility of adhering to DPOR and Commonwealth policies and standards. I further acknowledge that any infractions of this agreement may result in disciplinary action according to the DHRM Standards of Conduct including, but not limited to, termination.

This agreement will be signed upon employment and is required to be reviewed and 'Accepted' during annual Security Awareness Training thereafter.

Signature

Date of Signature

Name (Printed)

Supervisor / Manager Name (Printed)

Division (Print)
