

Winnebago County Information Technology Resource
Acceptable Use Policy

As an employee of Winnebago County, I _____,
recognize and understand that the following County Information Technology Resources (CITR),
e.g. computers, servers, phones, internet, email, software/hardware, etc. are to be used for
conducting the County's business only. I understand that these (CITR) are County property and
therefore private purpose use is strictly prohibited. I understand that these (CITR) may not be
used for solicitation, commercial ventures, religious or political causes, malicious intent or any
other non-job-related purposes. Further, I acknowledge that I will never use these (CITR) to
create or post any offensive or disruptive messages (e.g. gender/race/age specific comments, or
sexual, religious, political, ethnic orientation or any copyrighted, confidential, proprietary
information). I also agree to follow any County codes or State statutes regarding employee
conduct and ethical standards. Additionally, any electronic messages or documents composed,
sent, and received through these (CITR) are and will remain the property of the County. I agree
to not to use these (CITR) to download/upload/stream any non-work-related files or applications
that could potentially harm or impair the County's system. I also agree that I will not share my
user names/passwords with others nor use another's username/password.

I am aware that the County reserves and will exercise the right to review, audit, monitor, record,
all matters associated with these (CITR) at any time, with or without employee notice, and that
such access may occur during or after working hours. I agree that I will contact the County's
Department of Information Technology "DoIT" immediately if I become aware of any violations
to this agreement. I am aware that use of a County provided password or code does not restrict
the County's right to access electronic communications. I am aware that violations of this policy
may subject me to disciplinary action, up to and including discharge from employment.

I acknowledge that I have read and that I understand the County's Appropriate/Acceptable use
policy regarding the proper utilization of the County's Information Technology Resources
(CITR).

User's Name (please print)

User's Signature

Department

Phone

Location

Floor

Date Signed