CUSD Technology Department Staff-Owned Computer Inspection and Permission Form

Name of Owner:		Site/Phone:			
Device Information (circle one)	Desktop Computer	Laptop Computer	Printer	Other:	
Brand:		Model			
Serial Number:		Network Name:			
Wired MAC:		Wireless MAC:			
Operating System	n:				
Anti-Spyware	Software		Scan Date	:	
Anti-Virus	Software		Scan Date	:	
		Signature File Date:			
Computer Inspected by:			Date	:	
Agreement and	Disclaimer:				
	-) network is subject to the first of the fir		onditions set	
Employee Technology Use Agreement E4040.H					
Use of this device on the network is also subject to the following conditions:					
 CUSD may in CUSD may red CUSD may de 	quire specific softwar ny service to this dev	d from the device. oftware, and data of this e be installed and runnin ice at any time, for any mage to equipment nor	ng on the devic reason, withou	ce. It warning.	
in good operating		and I further agree to ma n expense, free from vir e network.			
Signature of Emp	ployee		Date		

Signature of Administrator

Calaveras Unified School District

Date