User Rules of Behavior Acknowledgment Form

As a user of an IT system, I acknowledge my responsibility to conform to the following requirements and conditions as directed by all relevant Information Assurance and Information Security Policies, Procedures and Guidelines. These conditions apply to all personnel who have access to Michigan/FBI CJIS systems and all appropriate IT personnel.

1. I understand that failure to sign this acknowledgment will result in denial of access to Michigan and FBI CJIS systems, terminal areas, and facilities that have FBI CJIS network equipment.

2. I acknowledge my responsibility to use the network only for official business except for such personal use involving negligible cost to the agency and no interference with official business as may be permissible under the acceptable use policy.

3. I understand that the network operates at a Sensitive but Unclassified level. I have all clearance necessary for access to the network, and will not introduce or process data that the network is not specifically designed to handle as specified by the FBI CJIS Security Policy and Michigan Addendum.

4. I understand the need to protect my password at the highest level of data it secures. I will NOT share my password and/or account. I understand that neither the Security Administrator/System Administrator, nor the Network Operations Center (NOC) will request my password. I will change my password at least every 90 days or as requested for security reasons.

5. I understand I am responsible for all actions taken under my account. I will not attempt to “hack” the network or any connected automated information system (AIS), or attempt to gain access to data for which I am not specifically authorized.

6. I understand my responsibility to appropriately protect all output generated under my account, to include printed material, magnetic tapes, floppy disks, CD-ROMs, and downloaded hard disk files. I understand that I am required to ensure all hard copy material and magnetic media is properly labeled as required by policies and regulations.

7. I understand my responsibility to report all AIS or network problems to my security point of contact. I will NOT install, remove, or modify any hardware or software.

8. I acknowledge my responsibility to not introduce any software or hardware not acquired and approved through the IT Security group. I also acknowledge my responsibility to have all official electronic media virus-scanned by the IT Security group before introducing it into the AIS or network.

9. I acknowledge my responsibility to conform to the requirements of the Rules of Behavior and Security Policies and Procedures. I also acknowledge that failure to comply with these policies and procedures may constitute a security violation resulting in denial of access to the AIS, network, or facilities, and that such violations will be reported to appropriate authorities for further actions as deemed appropriate to include disciplinary, civil, or criminal penalties.

10. I agree that I have no expectation of privacy in any equipment or media I use. I consent to inspections by authorized agency personnel, at any time and agree to make any equipment available for audit and review by FBI personnel upon request.

11. I further consent that my use of the Michigan and FBI CJIS systems within agency owned or leased space is subject to system monitoring.
12. I have completed the required biennial Security Awareness Training required by the FBI CJIS Security Policy and Michigan Addendum for individuals managing or accessing FBI CJIS systems and/or data.

User (Print Name): ___________________________   Date: _________________

User Signature: _______________________________  Date: _________________

LASO/Security Officer: ___________________________  Date: _________________