

**COMPUTER USAGE POLICY ACKNOWLEDGMENT**

My signature hereon acknowledges:

- A) My receipt of OLG's/DCRT's Computer Usage Policy;
- B) My understanding of the content of this policy;
- C) My intention of complying with this policy;
- D) My understanding that the office computers and related equipment, systems and services are the property of OLG/DCRT;
- E) My consent, by logging-on and using OLG's/DCRT's computers and related equipment, systems and services, for OLG/DCRT to monitor/inspect my computer usage; and
- F) I have no expectation of privacy regarding my usage of OLG's/DCRT's computers and related equipment, systems and services.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Agency Name