



**STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE**

**USER PASSWORD POLICY
STATEMENT OF UNDERSTANDING**

All permanent and temporary employees, including contracted employees, Selected Exempt Service (SES), Senior Management Service (SMS), Career Services, Other Personal Services (OPS) employees and employees of providers, vendors and third party organization who utilize Department of Juvenile Justice resources, should read the User Password Policy and acknowledge that they have done so by signing this Statement of Understanding. This form will become a permanent part of each employee's personnel or contractor's file. A copy of the original may be made and given to the employee. For more information, contact the Information Security Manager of the Department of Juvenile Justice.

I have read the Department of Juvenile Justice User Password Policy and agree to abide by it as consideration for my continued employment by, or on behalf of, the Department. I understand that violation of this policy or any of the Department's other Information Resource policies may result in revocation of user access, disciplinary action, up to and including my immediate dismissal, and/or potential criminal prosecution under Chapter 815, Florida Statutes, or other applicable law.

Print Name

People First ID Number
(DJJ Staff)

Signature

Date

Office/Program Name

Address

This form is to be filed in the employee's personnel file or the appropriate contract provider/vendor file.