

Appendix B – Agreement to comply with Information Security Policies

All employees working with cardholder data must submit a signed paper copy of this form. US Army IMCOM management will not accept modifications to the terms and conditions of this agreement.

Employee's Printed Name

Employee's Department

Employee's Telephone Number

Employee's Physical Address and Mail Location

I, the user, agree to take all reasonable precautions to assure that US Army IMCOM internal information, or information that has been entrusted to US Army IMCOM by third parties such as customers, will not be disclosed to unauthorized persons. At the end of my employment or contract with US Army IMCOM, I agree to return to US Army IMCOM all information to which I have had access as a result of my position with US Army IMCOM. I understand that I am not authorized to use this information for my own purposes, nor am I at liberty to provide this information to third parties without the express written consent of the internal US Army IMCOM manager who is the designated information owner.

I have access to a copy of the US Army IMCOM information security policies manual, I have read and understand the manual, and I understand how it impacts my job. As a condition of continued employment at US Army IMCOM, I agree to abide by the policies and other requirements found in that manual. I understand that non-compliance will be cause for disciplinary action up to and including system privilege revocation, dismissal from US Army IMCOM, and perhaps criminal and/or civil penalties.

I agree to choose a difficult-to-guess password as described in the US Army IMCOM information security policies manual, I agree not to share this password with any other person, and I agree not to write this password down unless it has been transformed in an unrecognizable way.

I also agree to promptly report all violations or suspected violations of information security policies to <job title.>

Employee's Signature