

**COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

Employee Acknowledgement of Camera Usage

It is the policy of the County of Los Angeles and DCFS that each employee shall be individually responsible for the protection of all County information, data, and information processing resources to which he or she has access by virtue of employment by the County.

I hereby acknowledge that I will be held accountable for my actions when using a camera through DCFS resources. I hereby state that I will use due diligence to conform my actions to the following usage rules governing camera usage:

- I shall use the camera for the sole purpose of carrying out my duties as an employee of DCFS and the County and **shall not use it for personal use**.
- I shall not modify the camera or its settings in any way. This includes the addition of internal or external components and/or the loading of any additional software.
- I shall not loan or share a camera with any other individuals inside or outside the Department.
- I shall not allow anyone to have access to the camera and/or case records/materials while working at home/field and/or while in transit between office and home/field.

I understand that my camera usage is subject to audit and review by authorized individuals as directed by the Director of the Department.

I recognize that the County may hold me responsible for any willful or negligent failure to comply with the above mentioned usage rules.

Employee Name

Employee Signature

Date

Supervisor's Name

Supervisor's Signature

Date