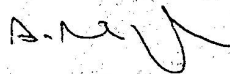


**UNIVERSITY OF HAWAII AT MĀNOA**

Department of Psychology  
Mental Health Services Research and Evaluation Center

April 22, 2005

TO: MHSREC Staff and Graduate Students  
MIS Staff  
PSR Hawaii State Hospital Staff and Graduate Students

FROM: A. Michael Wylie, Ph.D.   
Principal Investigator

SUBJECT: POLICY FOR PSR COMPUTERS AND EQUIPMENT

PSR Center staff and graduate students may be assigned to one or more computers and/or use other types of equipment (scanner, LCD projectors, audio visual equipment, etc.). Recently, there have been several reports about damaged laptop computers that are in no way considered normal "wear and tear" of the machine. To ensure that all laptops are properly taken care of, we will be asking you to look over the attached MIS Helpdesk Property Form. Please read, sign, and return to your department administrator by Monday, May 2, 2005. If the attached form is a copy of one you already signed, please keep it for your personal records.

This is a friendly reminder to be careful and responsible with the equipment you are assigned. If you notice any problems with the equipment, please report it immediately to the administrator of your department. The administrator will check to see if the computer is covered under warranty and will work with the MIS Helpdesk to make sure the problem is resolved.

Every machine is purchased with a limited warranty. If the machine is damaged from personal neglect, manufacturers will NOT fix it, regardless of whether or not there is a warranty. While normal wear and tear of the equipment is expected, excessive damage to a machine must be avoided. Considerable damage (broken screen, broken or missing keys, broken or missing peripherals, etc.) that is not reported on a timely basis will be considered neglect. So please report any damage as soon as possible after it occurs. Please be careful as neglect of equipment could possibly result in any of a variety of sanctions depending on the situation (i.e.: you may not be given access to other equipment in the future, you may be asked to pay for part or all of the expenses associated with fixing equipment, and in extreme cases you may be terminated).

Thank you for your cooperation in this matter.

Management Information Systems
45-710 Keaahala Road, L-5, Kaneohe, Hawai'i 96744
Phone: 808-236-8482

PROPERTY RECEIPT (FOR MIS ISSUED PROPERTY)

Form with fields: PRINT NAME (Last, First, M.I.), HOME ADDRESS, HOME/CELL PHONE, EMAIL, DIVISION/UNIT NAME, DIVISION/UNIT ADDRESS, OFFICE PHONE, OFFICE EMAIL, EQUIPMENT DESCRIPTION (INCLUDE MAKE, MODEL #, i.e., Dell 4000 Inspiron Laptop), SERIAL /SERVICE TAG #, DECAL #, MIS ASSET ID #.

INCLUDES THE FOLLOWING COMPONENT PART(S):

Table with 3 columns: DESCRIPTION (INCLUDE MAKE, MODEL #, i.e., Wireless card), SERIAL NUMBER, MIS ASSET ID #: Contains three rows with 'N/A' in the serial number column.

The above-item is hereby issued to \_\_\_\_\_ for off-site job related use during the term of employment with the Psychosocial Rehabilitation Center, University of Hawaii.

I hereby certify that the equipment and the data contained thereon shall be safeguarded at all times until returned. I understand the risks associated with removing data from the facility, agree to take and to use information only in accordance with policy, and assume responsibility for its protection and safe return.

I understand that in the event of my negligence, and the equipment is lost, stolen or damaged, that I may be held pecuniarily liable for replacement or repair of such equipment. I hereby certify that the equipment shall be safeguarded at all times until returned. I further certify that upon separation of my employment the above-item shall be returned by the last day of employment or I will be held liable for the replacement of such item at the full replacement cost at the time of separation, which entire amount may be deducted from my salary and/or balance of vacation leave payout to reimburse the applicable account through which this property was purchased.

PRINTED NAME \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

ISSUE/RETURN of PROPERTY table with columns: ISSUED BY: (PRINT NAME), SIGNATURE, DATE; RETURNED TO - [RECEIVED BY] (PRINT NAME), SIGNATURE, DATE. Includes entry for Alicia S. Oh PH: 236-8482.