

MONTGOMERY COLLEGE
Office of Information Technology
WORK-AT-HOME SOFTWARE REQUEST

The Maryland Education Enterprise Consortium (MEEC) work-at-home program provides an opportunity for College employees to install a copy of select Microsoft and Adobe products as well as Symantec End-Point Protection on their personally-owned computers. Montgomery College participates in the MEEC program and provides for the use of software for personally-owned computers for College-related purposes. Software licenses provided to College employees through the MEEC program are owned by the College. Employees are authorized to use the software and associated media in accordance to the terms and conditions of the Microsoft, Adobe, and Symantec campus agreements. Software must be removed upon termination of your employment with Montgomery College.

Please check the item(s) you would like:

- | | |
|---|--|
| <input type="checkbox"/> MS Office 2016 Professional for Windows | <input type="checkbox"/> MS Office 2016 for Mac |
| <input type="checkbox"/> MS Project Professional 2016 | <input type="checkbox"/> Symantec End-Point Protection for Mac |
| <input type="checkbox"/> MS Visio 2016 | <input type="checkbox"/> Adobe Creative Cloud 2015 for Mac |
| <input type="checkbox"/> Symantec End-Point Protection 14 for Windows | |
| <input type="checkbox"/> Adobe Creative Cloud for Windows | |

Check and sign indicating your agreement to the following **Terms of Use:**

- I agree to abide by the terms and conditions of the Acceptable Use Policy for information technology resources as approved by the Board of Trustees.
- I agree to abide by the terms of the license agreement(s) associated with the software requested.
- I understand that I am not licensed to use the software for personal purposes.
- I will remove the software from my personally-owned computer immediately upon the end of my employment at Montgomery College.
- I understand that technical support is not provided by Microsoft, Adobe, Symantec or Montgomery College for work-at-home software

Print Name: _____ Signature: _____ Date: _____

Department: _____ Campus mail box address: _____

RETURN COMPLETED FORM TO IT RESOURCE MANAGEMENT, CENTRAL SERVICES (CT)

IT USE ONLY

Form received ____/____/____

Copy sent to HR: ____/____/____