



Driving Under the Influence Internet Program Forms System
INTERNET SECURITY AGREEMENT CERTIFICATION
DADP REPRESENTATIVE

SECTION I

DADP REPRESENTATIVE NAME		DADP REPRESENTATIVE E-MAIL ADDRESS		DADP REPRESENTATIVE TELEPHONE NUMBER ()	
DIRECTOR OR DESIGNEE NAME					
DADP LOCATION			CITY	STATE CA	ZIP CODE
DADP DIRECTOR OR DESIGNEE TELEPHONE NUMBER ()			DIRECTOR OR DESIGNEE E-MAIL ADDRESS		

SECTION II

By signing this form, I acknowledge that I have read, understand and agree to its contents and realize the penalties for non-compliance with its terms.

The California Department of Motor Vehicles collects information from the Driving Under the Influence Program Providers, and is responsible for processing the information in order to take the appropriate driver license eligibility action. The information processed is from the three Driving Under the Influence forms submitted to the Department of Motor Vehicles by the Providers. These three forms are the Proof of Enrollment Certificate (DL 107), Notice of Completion Certificate (DL 101), and Notice of Non-Compliance (DL 101A). The Department of Motor Vehicles is committed to protecting this information from unauthorized access, use or disclosure. The following policies have been adopted to address the responsibilities for handling and protecting the information. I understand the following are my responsibilities as a user of the Driving Under the Influence Internet Program Forms System in the Department of Alcohol and Drug Programs Representative role:

User Responsibilities:

1. As an employee of the Department of Alcohol and Drug Programs, I may access information only when necessary to complete transactions on behalf of the Department of Alcohol and Drug Programs.
2. To complete the Driving Under the Influence Internet Program Forms System online instruction or classroom training prior to using the system.
3. To change my initial password, conforming to the following password standards, when logging onto the system for the first time:
 - a. Password must contain at least eight characters, but not more than 20 characters.
 - b. Password must contain at least five alpha characters, and at least one numeric character.
4. To change my password when notified the password will expire. (Password will expire every 60 days.)
5. To contact my DADP Administrator if I forget my password, allow it to expire, attempt unsuccessfully to logon three consecutive times, or password was disabled due to inactivity for 90 days.
6. To keep my password and user name confidential by taking precautionary measures to maintain the secrecy of the password and user name. Reasonable precautions include, but are not limited to the following:
 - a. Not sharing or allowing others to view my password or user name.
 - b. Never writing down or displaying my password or user name in plain text.
 - c. Securing my personal computer with a password or locking device when it is unattended while logged onto the Department of Motor Vehicles Driving Under the Influence Internet Program Forms System.
 - d. Reporting any suspicious circumstances or unauthorized individuals observed in work area to my DADP Administrator.
7. To report suspicious activity to the Department of Motor Vehicles.
8. To notify my DADP Administrator when the user name and password should be disabled because my official duties no longer require access to the Department of Motor Vehicles Driving Under the Influence Internet Program Forms System, or due to separation from the position with the Department of Alcohol and Drug Programs.
9. To transmit and query information only when relevant and necessary in the ordinary course of performing my official duties.

- 10. To disclose Department of Motor Vehicles Driving Under the Influence Internet Program Forms information to individuals only when relevant and necessary in the ordinary course of performing my official duties.
- 11. To contact my DADP Administrator when I have questions regarding the Driving Under the Influence Internet Programs Forms System.

I have read and understand the security procedures stated above. I acknowledge and agree to utilize the Driving Under the Influence Internet Program Forms System in accordance with the terms outlined in this Internet Security Agreement Certification. I understand that failure to comply with these procedures may result in disciplinary action in accordance with applicable laws and regulations or civil and criminal prosecution in accordance with applicable statutes. I further understand that I can undergo disciplinary action from the Department of Alcohol and Drug Programs, up to and including termination of employment.

I certify under penalty of perjury, under the laws of the State of California, that the foregoing statements are true and correct.

EXECUTED AT: CITY	COUNTY	STATE
DATE	SIGNATURE OF DADP REPRESENTATIVE X	
DATE	SIGNATURE OF DIRECTOR OR DESIGNEE X	

The original Certification must be kept on file at the Department of Alcohol and Drug Programs worksite and made available upon request to the Department of Motor Vehicles, Audit Staff.