



**VIRGINIA STATE UNIVERSITY**  
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**VIRGINIA STATE UNIVERSITY, VIRGINIA 23806**  
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[vsu\\_servicedesk@vsu.edu](mailto:vsu_servicedesk@vsu.edu)

**Virginia State University**  
**Employee/Vendor/Contractor RSA Hardware Token Agreement**

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I understand that the RSA Hardware Token is Virginia State University property and is for my use while I serve as an employee, contractor, or vendor at Virginia State University (VSU) and as such I will use this device in a responsible manner and in accordance with University policies.

I understand that as the RSA Hardware Token is the property of VSU, I will use it in accordance with the guidelines for VSU Virtual Private Network (VPN) access. I will return the RSA Hardware Token to VSU Technology Services when requested. I will take appropriate steps to protect the RSA Hardware Token against loss, theft, or damages including but not limited to the following:

- I will not leave the RSA Hardware Token in any public place;
- I will not leave the RSA Hardware Token in my car, unless the car is locked and the RSA Hardware Token is hidden from view;
- I will not check the RSA Hardware Token in luggage (when traveling); and
- I will not tamper with the RSA Hardware Token.

In addition, I will accept financial responsibility for the loss or theft of the RSA Hardware Token and I will accept financial responsibility for the RSA Hardware Token damages caused by accident, abuse, misuse and other external causes. I acknowledge that this responsibility includes, but may not be limited to, paying the replacement costs (\$ 50.00) for the RSA Hardware Token.

Should the RSA Token Hardware Token be lost, damaged or stolen, I will immediately report its loss, damage or theft to the VSU Technology Services department for appropriate action.

I also agree to abide by the Acceptable Use Policy for Information Technology (<http://www.vsu.edu/files/docs/technology-services/it-acceptable-use-standards.pdf>) while using the RSA Hardware Token when accessing the VSU VPN.

**Employee/Vendor/Contractor Acknowledgement**

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I have read and agree to be bound to the terms of this Agreement. I understand that I could be held financially responsible for the loss, theft or damages of the device and the disclosure of information should I fail to take appropriate steps to protect the device and its contents in accordance with this agreement.

Printed Name: \_\_\_\_\_ Active Directory/Username: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Token Serial Number: \_\_\_\_\_ Office Phone Number: \_\_\_\_\_

Mobile Phone Number: \_\_\_\_\_