Approval Request for use of Social Media and Related Online Communications

Platform (e.g. Facebook, Google+, Twitter	:	
Name of page or site:		
URL:		
Purpose:		
Administrator/Manager:		
Administrator/Wariager.		
I understand the following as outlined in EWSU Executive Policy Manual:Activities must be transparent;	xecutive Policy #4, Electronic Co	ommunication Policy, in the
 Real names are to be used (no pse My role at WSU will be disclosed; 	udonyms or anonymous posting	gs);
 A professional attitude must be maintained at all times; and Records of account/site usernames and passwords will be maintained to facilitate transition of account management if necessary. 		
I will respect WSU time and property and use (see RCW 42.52.160, WAC 292-110-01		een personal and professional
I will protect confidential and proprietary	information (see BPPM 90.05, 9	0.06, and 90.07).
I will respect copyright and fair use.		
I will not use the WSU or WSU Extension r	ame or logo inappropriately (se	e BPPM 35.10 and 60.90).
I will follow WSU public records and recor are archived and retained as required (RC		
I will adhere to the terms of service as app	licable to the social media platf	orm utilized.
WSU Employee Name	Signature	Date
Approval to participate as part of job: Supervisor Name	Signature	Date
Approval for official groups or pages: Dean/Vice President/Chancellor	Signature	Date