

**KNOX COUNTY SCHOOLS  
MAINTENANCE & OPERATIONS DEPARTMENT**

**REQUEST FOR PAGER AND PAGER ACKNOWLEDGEMENT**

<b>SIGNATURE OF FOREPERSON/SUPERVISOR:</b>	_____
<b>EMPLOYEE TO RECEIVE PAGER:</b>	_____
<b>EMPLOYEE NUMBER:</b>	_____
<b>CRAFT/SCHOOL/ASSIGNMENT:</b>	_____

You are receiving a pager to facilitate your work efforts. Before you accept the pager, please read the statements below. Once you have read the statements below, sign at the bottom of the sheet and return this sheet to me.

1. The Knox County Schools Maintenance & Operations Department (KCSMO) is providing this pager for your convenience as an employee of the department.
2. KCSMO reserves the right to retrieve the pager and no longer provide the service to you if the need arises.
3. KCSMO will replace pagers due to normal on-the-job wear and tear. However, pagers that are damaged, destroyed or lost outside of normal on-the-job wear and tear will obligate the employee to repair or replace the unit at his or her cost. The current cost is approximately \$50.
4. When you leave this employment you must return your pager. Failure to return the pager will result in the value of the pager being deducted from your last paycheck.

I \_\_\_\_\_ agree to abide by the terms and conditions of the  
(Print Please)

pager guidelines as delineated above.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Number of the Pager Issued this date: \_\_\_\_\_

Craft/School: \_\_\_\_\_