



अखिल भारतीय आयुर्विज्ञान संस्थान, भोपाल

ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL

Saket Nagar, Bhopal – 462020 (Madhya Pradesh) India

Website: www.aiimsbhopal.edu.in

User Declaration Form for e-Office Application at AIIMS, Bhopal

The e-Office application of NIC is to be used by AIIMS, Bhopal for various official functionalities electronically. All the users of AIIMS, Bhopal duly authorized by NIC in the application are requested to follow the guidelines as detailed below. A User Declaration Form (UAF) with the prescribed terms and conditions mentioned below is required to be duly signed and submitted by each e-Office user to the Nodal Officer (eOffice), AIIMS, Bhopal through proper channel to undertake for complying to the relevant roles, responsibilities and mentioned rules of the application.

Full Name	
Designation	
Service Type (Regular / Deputation / Contractual/Outsource)	
Employee Id	
Department	
Registered Mobile Number	
Email Registered in e-Office application (@aiimsbhopal.edu.in)	

1. The user is responsible for protecting the confidentiality of information that it collects, uses, stores and discloses over the course of its operations in the application. The user will have access to e-Office application as part of his duties and responsibilities related to his role provided in the application.
2. The duly filled and signed forms by the users submitted to Nodal Officer (e-Office) are considered the legal record for the respective e-Office user.
3. The user agrees to sign the declaration covering following terms –

4. Appropriate Collection, Use and Disclosure of Information

- 4.1 I shall only collect, access, use and disclose the minimum information necessary for the purpose of fulfilling my duties and responsibilities related to my role in e-Office application.
- 4.2 I will not access information except as necessary for my responsibilities.
- 4.3 I shall ensure that information I enter into an e-Office application is complete and accurate to the best of my ability.
- 4.4 I shall dispose of any information I access from the e-Office applications (whether in electronic or paper form) in a secure manner as explained in the document.
- 4.5 I shall use reasonable means to ensure that while I am accessing information on the e-Office applications, it will not be viewed or obtained by unauthorized people (e.g. secure my computer, be discreet when viewing data).
- 4.6 I understand that AIIMS, Bhopal retains custody and control over all information contained in the AIIMS, Bhopal instance of the e-Office application.
- 4.7 I shall not collect, use, transmit or disclose any information except as allowed in my roles in the e-Office application.

5. System Security

- 5.1 I will keep any e-Office application login information, such as my user password, confidential and will not share this login information with anyone else.
- 5.2 I am responsible for ~~any~~ use of any e-Office application performed under my login information.
- 5.3 I will not leave my workstation unattended without logging out or securing my workstation or application.
- 5.4 I will not use or obtain another person's login information.
- 5.5 If I believe my login information may be known by another person, I will immediately change my password and notify the Nodal Officer (e-Office).

6. Confidentiality Provisions

- 6.1 I shall take reasonable actions to keep all information private and confidential and prevent the unauthorized collection, use and/or disclosure of any information available in e-Office application that I come into contact with.
- 6.2 I accept that the obligation to keep information collected processed from e-Office application confidential continues even after my roles and responsibilities end.

7. Audit and Sanctions

- 7.1 I understand and acknowledge that AIIMS, Bhopal conducts random audits of e-Office applications and may audit my use of any e-Office applications without notice.
- 7.2 I understand that AIIMS, Bhopal, in its sole discretion, may revoke or restrict my access to any e-Office application information for any reason, with reference to policies.

7.3. I acknowledge that I have read the policies referenced above and understand the consequences for a violation of those policies and/or this Declaration-cum-Declaration.

8. Handling of Digital Signature Certificate

8.1 I understand the following significant points relating to Digital Signature Certificate (DSC), if allotted to me, to be used in e-Office application at AIIMS, Bhopal only.

8.2 The allotted DSC is a Class 2 certificate which is to be used for signing digital documents and note sheets in the e-Office application which is legally valid.

8.3 Since Digital Signatures have legal validity and are at par with physical signatures, it is the responsibility of the certificate holder to keep his certificate safely and not share it with any individual. The allotted USB Token will be used for storing the certificates securely.

8.4 Also, in case the certificate is lost or stolen, it is the responsibility of the e-Office user to revoke his certificate and obtain a new one. The allotted DSC will be valid for a period of 2 years and needs to be renewed thereafter.

9. Notification at end of service

9.1 I understand that in case of leaving the Institute, I will surrender my allotted e-Office credentials and physical USB token for DSC to the Nodal Officer (e-Office), AIIMS, Bhopal.

10. This Declaration is subject to cyber laws of the country and such other laws as are for the time being in force.

I accept the rules and expectations described in this Declaration.

Date :

Signature :

Name :

Designation :

**Signature
(Head of Department)**