Social Media Memorandum of Understanding

I, the undersigned, on behalf of myself and all of my department's employees, attest that I have read and understand the provisions outlined in the Social Media policy posted at http://intra.miamidade.gov/policies/social-media.asp. In the event my department receives approval from the Communications Department to proceed with social media programming, I agree to abide by all the provisions contained therein, as well as the Terms of Use for each social media utility or application my department uses.

I further understand that the Communications Department may, in its sole discretion, remove any unsuitable content from social media sites and revoke a social media administrator's access for violations of this policy.

Department Director's Name (print)	Department	
Department Director's Cignature	Data	
Department Director's Signature	Date	

Email the completed form to socialmedia@miamidade.gov.

