

END USER LICENSE AGREEMENT

CLIENT MANAGEMENT INFORMATION SYSTEM



The Client Management Information System (CMIS) allows sharing of client information for the provision of services in Palm Beach County through a networked infrastructure that establishes electronic communication among Member Agencies. Participation in the CMIS enables the collection and sharing of unduplicated countywide aggregate data on homeless service delivery. The CMIS provides a standardized assessment of client needs, supports the creation of individualized service plans and records the use of housing and other related services.

This document outlines the role and responsibilities of End Users. All End Users have a vital role in ensuring the accuracy and quality of data entry.

Member Agency:				
<u>User Information</u>				
Name of User/ Position or Role	Location Name			
Email Address	Work Phone			
Location Address				
 Meet basic computer competency/skills to Complete all CMIS training requirements Comply with all system security and confirencedure Manual and in CMIS training (Security) Maintain the confidentiality of assigned Use Maintain client confidentially and uphold Procedures Manual (Section 10) Report suspect security breaches to my Age Enter client data fully complying with HU Enter client data in real-time adhering the Comply with End User inactivity requirements Manual (Section 11) Maintain high standards of professional with respect and fairness I understand that a failure to comply with the absuspension of my user license. 	Policies and Procedures Manual ter and meet background requirements of my agency adequately use and navigate CMIS dentiality policies outlined in the CMIS Policies and Section 11) ser ID and password all client rights outlined in CMIS Policies and sency Administrator D Universal Data Elements standards CMIS Policies and Procedures Manual (Section 15) irements as outlined in CMIS Policies and la conduct treating clients and other Member Agencies pove responsibilities may result in the removal or			
User Signature	Date			

Agency Administrator Printed Name

Agency Administrator Signature



AFFIDAVIT OF GOOD MORAL CHARACTER

HHA Palm Beach County

CLIENT MANAGEMENT INFORMATION SYSTEM

State of Florida - County of Palm Beach

(Applicant / Employee Name)

As an applicant requesting a user license for the CMIS system I affirm and attest under penalty of perjury that I meet the moral character requirements for laid out by the Palm Beach County COC in that:

I have not been arrested with disposition pending or found guilty of, regardless of adjudication, or entered a plea of nolo contender or guilty to or have been adjudicated delinquent and the record has not been sealed or expunged for, any offense prohibited under any of the following provisions of the Florida Statutes or under any similar statute of another jurisdiction for any of the offenses listed below:

Relating to:

Section 393.135 sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct sexual misconduct sexual misconduct with certain mental health patients and reporting of such sexual misconduct sexual misconduct adult abuse, neglect, or exploitation of aged persons or disabled adults or failure to report of such abuse criminal offenses that constitute domestic violence, whether committed in Florida or another jurisdiction

Section 782.04 murde

Section 782.07 manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated

manslaughter of a child

Section 782.071 vehicular homicide

Chapter 784 assault, battery, and culpable negligence, if the offense was a felony

Chapter 748.048 cyberstalking

Section 784.011 assault, if the victim of offense was a minor Section 784.03 battery, if the victim of offense was a minor

Section 787.01 kidnapping

Section 787.02 false imprisonment Section 787.025 luring or enticing a child

Section 787.04(2) taking, enticing, or removing a child beyond the state limits with criminal intent pending custody

proceeding

Section 787.04(3) carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing

or delivering the child to the designated person

Section 790.115(1) exhibiting firearms or weapons within 1,000 feet of a school

Section 790.115(2) (b) possessing an electric weapon or device, destructive device, or other weapon on school property

Section 794.011 sexual battery

Former Section 794.041 prohibited acts of persons in familial or custodial authority

Section 794.05 unlawful sexual activity with certain minors

Chapter 796 prostitution

Section 798.02 lewd and lascivious behavior Chapter 800 lewdness and indecent exposure

Section 806.01 arson Section 810.02 burglary

Section 810.14 voyeurism, if the offense is a felony section 810.145 video voyeurism, if the offense is a felony

Chapter 812 theft and/or robbery and related crimes, if a felony offense

Chapter 815 computer related crimes

Chapter 815.06 offenses against computer users
Chapter 815.034 Florida Communications Fraud Act

Chapter 847.0135 computer pornography

Section 817.563 fraudulent sale of controlled substances, if the offense was a felony

Section 817.568 criminal use of personal identification information

Section 825.102 abuse, aggravated abuse, or neglect of an elderly person or disabled adult

Section 825.1025 lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult

Section 825.103 exploitation of disabled adults or elderly persons, if the offense was a felony

Section 826.04 incest

Section 827.03 child abuse, aggravated child abuse, or neglect of a child Section 827.04 contributing to the delinquency or dependency of a child

Section 817.034 fraudulent acts through mail, wire, radio, electromagnetic, photo electronic, or photo optical systems

Section 817.568	criminal use of personal identification information
Section 817.60	obtaining a credit card through fraudulent means
Section 817.61	fraudulent use of credit cards, if the offense was a felony
Section 831.01	forgery
Section 831.02	uttering forged instruments
Section 831.07	forging bank bills, checks, drafts or promissory notes
Section 831.09	uttering forged bank bills, checks, drafts, or promissory notes
Section 831.30	fraud in obtaining medicinal drugs
Section 831.31	the sale, manufacture, delivery, or possession with the intent to sell, manufacture, deliver any counterfeit controlled substance, if the offense was a felony.

I also affirm that I have not been designated as a sexual predator pursuant to s. 775.21; a career offender pursuant to s. 775.261; or a sexual offender pursuant to s. 943.0435, unless the requirement to register as a sexual offender has been removed pursuant to s. 943.04354.

I understand that I must acknowledge the existence of any applicable criminal record relating to the above lists of offenses including those under any similar statute of another jurisdiction, regardless of whether or not those records have been sealed or expunged. Further, I understand that, while using a CMIS license, if granted, I must immediately notify my supervisor/employer of any arrest and any changes in my criminal record involving any of the above listed provisions of Florida Statutes or similar statutes of another jurisdiction whether a misdemeanor or felony. This notice must be made within one business day of such arrest or charge. Failure to do so could be grounds for termination.

I attest that I have read the above carefully and state that my attestation here is true and correct that my record does not contain any of the above listed offenses. I understand, under penalty of perjury, all users granted CMIS licenses shall attest to meeting these requirements and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses.

I also understand that it is my responsibility to obtain clarification on anything contained in this affidavit which I do not understand prior to signing. I am aware that any omissions, falsifications, misstatements or misrepresentations may disqualify me from being granted a CMIS user license.

SIGNATURE OF AFFIANT:		

-- Sign Above OR Below, DO NOT Sign Both Lines --

To the best of my knowledge and belief, my record contains one or more of the applicable disqualifying acts or offenses listed above. I have placed a check mark by the offense(s) contained in my record. (Please circle the number which corresponds to the offense(s) contained in your record.)

SIGNATURE OF AFFIANT:	_	_