Webmasters at Monmouth College perform the following functions:

- Within their unit, they coordinate the gathering of accurate information for the Web page and decisions about how the information will be organized.
- Determine within their unit how often page information is going to change and when information will be updated.
- Integrate Web information into their unit’s publication cycle.
- Prepare the information for display on the Web by saving it in the appropriate file type (See Web Design Guidelines).
- Respond in a timely fashion to e-mail inquiries generated by their pages and to Webmaster queries related to their unit.
- Verify that the information they place on the Web is accurate and current.

As a webmaster, I agree to accept the responsibilities outlined for the unit designated below. I have read and understand the documents Information Systems Policies and Procedures and World Wide Web Publishing Policies (located in the Outlook public folders…see illustration to the right) and will comply with their requirements.

Name of Department/Group/Unit: ___________________________________________________________

Name of Webmaster (please print): _______________________________________________________

Phone Number: ___________________________ E-mail address: ________________________________

Signature of Webmaster: _______________________________ Date: _________________________

Department Head/Supervisor Section (to be completed by the Department Head/Supervisor)

I authorize the individual mentioned above to act as a designated Webmaster for
(Insert name of web site address:) http://department.monm.edu/______________________________

I have read the Webmaster AGREEMENT and understand the responsibilities involved, I have read and understand the documents Information Systems Policies and Procedures and World Wide Web Publishing Policies (located in the Outlook public folders…see illustration to the right) and will comply with their requirements.

Signature: _______________________________ Date: _________________________

Department Head/Supervisor (please print): _______________________________________________

Title of Dept. Head/Supervisor: _________________________________________________________

Phone Number: ___________________________ E-mail address: ______________________________

Office Use
Server: ______________________ Title: ______________________ Code: __________________ Date: ______________________

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