

**ConnectEd Text Messages**

*Monroe 2 - Orleans Board of Cooperative Educational Services*

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Please sign and date this form if you would like to receive ConnectEd messages via text messaging on your phone.

***Note:*** *You will still receive a phone call to this number, in addition to a text message.*

Employee name (PLEASE PRINT)

The phone number I would like to receive text messages at is:

Date

Department

\*\*\* Please send this original, signed form to the Office of Human Resources for processing.

Employee Signature

Rev 09/19

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