

# Cellular Authorization Request Form

Employee Name \_\_\_\_\_ Effective Date of Request \_\_\_\_\_

Department \_\_\_\_\_ Campus Phone Number \_\_\_\_\_

Justification \_\_\_\_\_

Examples: Emergency Response, 24/7 availability, must perform university business from off campus, maintains mission critical systems

## (One-time) Equipment reimbursement

cost of Verizon, AT&T, Sprint.

The current averages are:

Basic Phone (voice)	\$117.00	\$88.00
Smart Phone (both)	\$438.00	\$329.00
Hotspot (data)	\$167.00	\$126.00

**Service reimbursement will be reimbursed quarterly. Reimbursement will be based on actual billed amounts up to the levels listed below.**

Basic Phone (voice)	\$126.00 per quarter
Smart Phone (both)	\$225.00 per quarter
Hotspot (data)	\$159.00 per quarter

Equipment reimbursement: \_\_\_\_\_

Quarterly Service Ä they \_\_\_\_\_

have  
read and agreed to abide by CSWBC Cellular Services Policy.

**Level 1 confidential data cannot be used or stored on cellular equipment**

Employee's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Dean/Dept Manager's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Cabinet Officer's Signature: \_\_\_\_\_ Signature: \_\_\_\_\_