## **COMMUNICATION SERVICE USAGE AGREEMENT**

(Maintain in Department Personnel Files)

## REQUESTOR INFORMATION

Name:	Title:
Department:	Office Phone #
EQUIPMENT INFORMATION	
Manufacturer & Model Number of Equipment:	Phone #
Accessories Received:	
The University is providing me with this mobile phone, pager, or other communication	
equipment for the sole purpose of enabling me to perform my job duties.	
Personal use of this equipment is not allowed. (NOTE: Departments may add a  statement that accessional personal use is acceptable as length as the personal use is	
statement that occasional personal use is acceptable as long as the personal use is minimal and does not result in additional charges to the University.)	
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If the equipment is lost or damaged, I understand that I may be required, at the discretion	
of the department, to pay for the replacement equipment.	
If I terminate my employment with this department, all equipment will be returned to the	
department as part of the termination process.	
<ul> <li>The University has the right to review bills for communication services plans.</li> </ul>	
By signing this form, I acknowledge receipt of equipment and agree to the Communication Service Usage Agreement.	
Service Usage Agreement.	
Sign	Date
Print Name /Title	