



University-Owned Cell Phone Request Form

Select the option that applies: Device for an individual Device for a group

Unit/Department:	Unit/Department Requester:
Complete employee information below if the purchase is for an individual employee instead of a group.	
Employee Name:	Employee ID:
Job Title:	

Eligibility Justification: Describe how the requested university-owned cell phone meets an allowable use in the 9.17 Technology Allowances and University-owned Cell Phone Policy .

Confirmations and Signatures

Unit/Department Head: Please sign below to confirm your review and approval of this request.

<i>Unit/Department Head Signature:</i>	<i>Date:</i>
<i>Typed or Printed Name and Title of Unit/Department Head:</i>	

Account Manager: Please sign below to attest to the following:

- The requested university-owned cell phone meets an allowable use as described in the 9.17 Technology Allowances and University-owned Cell Phone Policy.
- The eligibility justification provided above is accurate.

<i>Account Manager Signature:</i>	<i>Date:</i>
<i>Typed or Printed Name and Title of Account Manager:</i>	

Attach fully signed form to cell phone purchase as part of supporting documentation.
The account manager is responsible for ensuring this form is kept on file with the unit to be provided for audit purposes.