MINNESOTA STATE UNIVERSITY MOORHEAD

AUTHORIZATION FOR CELLULAR DEVICES AND PLANS

(Print) _____
Employee Last Name First Name

☐ Initial Authorization

_____
Wireless # *(required for Annual Review)*

Cost Center:_____

☐ Annual Cellular Device & Plan Review

The university may provide a cellular device or a mobile computing device, or other wireless communication service plans to an employee if it is determined by the university to be a necessary business expense under one or more of the following criteria:

☐ Availability of device and service is integral to the performance of specific duties within the employee's job description.
Explain:

☐ A substantial portion of the employee's work is conducted outside of the building or buildings where the employee is assigned to work.
Explain:

☐ The employee does not have an assigned office or workspace and needs to be contacted on a regular basis by college, university, or system office constituents for assigned services or to provide needed information.
Explain:

☐ It is a job requirement that the employer be able to reach the employee outside of the employee's normal work hours.
Explain:

☐ The mobile computing device is for use by a faculty or staff member and is intended to replace or complement a desktop computer.
Explain:

Type of service: ☐ VOICE ☐ DATA ☐ TEXTING

I verify that the cellular device and service is needed as described above and authorized under Minnesota State Colleges and Universities Policy 5.22 and Cellular and Other Mobile Computing Devices Procedure 5.22.2.

_____ _____
Employee's Signature Date **Supervisor's Signature Date**

_____
Authorized Administrator Date
(Vice President of Division)

Return completed form to MSUM Business Services.