



WIRELESS DEVICE AND SERVICE PLAN
ENROLLMENT AND PAYROLL AUTHORIZATION FORM

This form must be completed properly for use in obtaining a University-issued wireless device or allowance. For information on selection of devices and plans, please work with your department's cell phone administrator.

BUSINESS USE DETERMINATION:

I, \_\_\_\_\_, am requesting a University-issued wireless device or a monthly allowance for business use of my own wireless device, as the following condition(s) are applicable to my employment at CSU:

Business use of Wireless Device (check all that apply):

- Employee travels or works regularly in the field, and, while away from the campus workplace, needs to be accessible for communications and/or requires access to online resources, e.g. email, calendar, web, etc., via a mobile communications device;
Employee is responsible for critical services or infrastructure, and needs to be accessible for communications and/or requires access to online resources via a mobile communications device; and/or
Mobile access and/or access to information technology systems via a mobile communications device would, in the judgment of the supervisor, render the employee more productive and/or the service the employee provides more effective, and the cost of mobile communications service is therefore warranted.

Other: \_\_\_\_\_

PLAN OPTION - Select option #1 or #2

#1. ALLOWANCE OPTION (for use of a personal wireless device):

I hereby attest that I have a personal mobile device used for CSU business, and I elect to receive a monthly allowance through payroll. I understand and agree to the Mobile Communications Program policy, as follows:

- Voice and text messaging (\$25/monthly allowance)
Voice, text messaging and data (\$40/monthly allowance)

I further agree to notify my manager promptly if my service is discontinued or changed, or if I am no longer using my mobile device for CSU business. The university may recover any amounts paid for periods in which I did not have a personal mobile device in use for my CSU employment purposes.

-- OR --

#2. CORPORATE PLAN AND DEVICE OPTION (for use of a CSU-provided wireless device)

I elect to enroll in a corporate plan with the university's selected cell phone provider

I have read and understand the policy on use of wireless devices and services in accordance with the CORPORATE PLAN AND DEVICE OPTION #2. Based upon this understanding, I choose the following option (select one):

Opt Out - NO PERSONAL USE

In selecting this option, I agree to the following:

- I will not use the CSU wireless device for anything other than business use as agreed upon with my supervisor.
I will neither initiate any personal use, nor provide access to the phone for use by anyone else, nor provide the cell phone number to anyone who would only be likely to call me for personal use.

Opt In - PERSONAL USE\*. The CSU wireless device will primarily be for business use, and I will comply with the personal usage limit of incidental personal use only. I also acknowledge and agree that, in the event my circumstances change, such that any of the foregoing information or the business use for my plan participation are no longer correct, I will immediately notify my manager.

\*Hourly Employees are Ineligible for Allowance and Opt-In Plans

**SECOND DEVICE REQUEST**

A second mobile device may only be approved in *exceptional circumstances* based on substantial business need, not convenience to the employee.

a. *Type/model of device:* \_\_\_\_\_

b. *What is the functionality of the second device that is different and unique from that offered by the primary device?*

\_\_\_\_\_

c. *What is the substantial business purpose that the primary device cannot serve?*

\_\_\_\_\_

**Authorization for payroll deduction:**

I hereby authorize my pay advice to reflect ONE of the following:

**I authorize payroll to provide me with an allowance in my monthly pay advice for the following amount:**

Voice and text messaging (\$25/month)

Voice, text messaging and data (\$40/month)

-- OR --

**I authorize payroll to deduct from my monthly pay advice the following amount:**

Opt In – Personal Use fee of a CSU business phone (\$10.86/month)

I understand that I may be responsible for actual charges if the University determines at any time that the payroll deduction is inadequate to account for my personal use and I agree to adjustments of the initial payroll deduction based upon the University’s periodic review of my account. I further authorize payroll deductions for applicable excess taxes, surcharges, additional services, and related charges not included in the options listed above as applicable.

**Informed Consent:**

I, the employee named above, hereby attest that I have read the Colorado State University Mobile Communications Program Policy, and that I understand the policy and the duties imposed upon me by the University.

**SIGNATURES:**

<b>EMPLOYEE:</b> Signature: _____ Printed Name: _____ CSUID: _____	<b>DEPARTMENT HEAD/DIRECTOR:</b> Signature: _____ Dept./Title: _____ Printed Name: _____
<b>UNIVERSITY CONTROLLER</b> (for second device approval)	<b>VP for Research or VP for University Operations</b> (for wearable device approval)