

University of Rhode Island
University Owned Cellular Phone/Broadband Request Form

Employee name: New request Renewal

Department : Dates of service:

Vendor Name: Vendor PS ID#:

Number of minutes required: Plan cost: \$/mo.

Plan Name/Type

If this is a renewal:

Cellular phone number: Account number assigned by vendor

This position is eligible for a University issued Cellular Device due to the following criteria (check all that apply):

- Safety requirements indicate having cellular phone is an integral part of performing duties of job description
- More than 50% of work is conducted in the field
- Required to be contacted on a regular basis
- Required to be on-call 24/7
- Critical decision maker
- Other:

Plan Review and estimated usage:

- Two Way Radio/Push-to-talk only.**
- 1st Level :** light to moderate usage of the cellular phone for business purposes (Quote attached)
- 2nd Level:** moderate to heavy usage of the cellular phone for business purposes. (Quote attached)
- 3rd Level :** very heavy usage of the cellular phone for business purposes & requires data services for PDA/Blackberry (Quote att.)
- 4th Level exception:** a memo of explanation is required. (Quote attached).

Employee Certification:

I certify that I have read the University of Rhode Island/State of RI Policy/Procedures Number A-54 and agree to the terms set forth within. I also understand that per State of RI, DoIT Policies number 09-01 and 10-04 regarding Mobile Device Security, I will be responsible for securing this device and all information contained within and that this information is the property of the University.

Employee Signature

Date

Department Head, Dean or Director

Date

Upon completion, this form is to be forwarded to the University of RI Purchasing Dept. with a signed college requisition and quote.