

Employee Name

Information Technology Services Cellular Authorization Request Form

Effective Date of Request

Department	Campus Phone Number			
Justification				
	s: Emergency Response, 2 ritical systems	24/7 availab	ility, must perform university busin	ess from off campus, maintains
(One-time) Equipment Verizon,AT&T, and Spi		oased on	75% of the averaged equip	oment cost of
The current averages are:				
Basic Phone (voice) Smart Phone (both) Hotspot (data)	\$269.00 \$1092.00 \$195.00	x.75= x.75= x.75=	\$203.00 \$820.00 \$146.00	
Service reimbursemen amounts up to the leve		d quarterl	y. Reimbursement will be	based on actual billed
Basic Phone (voice) Smart Phone (both) Hotspot (data)				
Equipmentreimbursem	ent:			
Quarterly Service reimb	oursement:			
By signing this docume have read and agreed to Level1 confidential date	o abide by <u>CSUB's C</u>	<u>ellular Se</u>		owledge that they
Employee's Name:			Signature:	
Dean/Dept Manager's Nar	me:		Signature:	
AVP/HR Name:			Signature:	
Cabinet Officer's Name:			Signature:	