

## Cell Phone Request and Approval Form

\_\_\_\_\_  
Employee Name

\_\_\_\_\_  
Employee Title

\_\_\_\_\_  
Department

\_\_\_\_\_  
Office Ext Number

Description of criteria for cell phone request:


Equipment requested:


Budget number for hardware and monthly charges: \_\_\_\_\_

Voice/data services available are only those services under Gonzaga's contract with the current provider. For more information contact University Purchasing.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Departmental Approval Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President Approval Signature

\_\_\_\_\_  
Date

## Cell Phone Policy Acknowledgement and Agreement

I acknowledge that I have read and understand the Gonzaga University Cell Phone Policy, and I agree to abide by the policy.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date