

ATTACHMENT A

Employed-Owned Wireless Communications Device (WCD) Justification and Approval form for Business Need

DATE:	
EMPLOYEE NAME:	
EMPLOYEE ID#:	
EMPLOYEE TITLE/FUNCTION:	

I supervise the above employee, and I am writing to certify that the work he/she performs requires the higher degree of access available through wireless communications. The following factors support a wireless communications allowance for the employee [*check/complete all that apply*]:

Key Personnel	
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee is designated among key personnel for executive management (i.e., members of the Executive Leadership Team and academic deans), emergency or safety purposes.
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee supports or is responsible for programs, services or systems that necessitate frequent and immediate communications throughout the day, after-hours or while away from the office on travel.
Technical Monitoring	
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee is required to monitor essential systems, which may include receiving text messages from such systems upon outages or conditions outside of operating standards.
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee must be available immediately for service calls or trouble-shooting during the work day.
No Better Communication Source:	
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee does not have access to other communication devices while on the job either because the employee has no assigned office and/or primary work location changes based on assignments. Such employees are only eligible for designation if the University requires that they maintain regular contact with the institution and if cellular technologies are judged by the University to be the best options for doing so.
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee is required to travel on a frequent basis and must maintain regular communication while in travel status.
<input type="checkbox"/>	<ul style="list-style-type: none"> The employee performs the majority of his/her job duties in the field where business either cannot be conducted by a landline telephone or it would be inefficient to use a landline telephone.
Other Justification: (<i>explain below</i>)	
<input type="checkbox"/>	

The University reimburses the individual with a monthly allowance of \$60. This requires employees to provide their personal number for business use.

Once annually, verification that each individual still meets one or more of the eligibility criteria by the area VP is required.

	APPROVED?		DATE
	Yes	No	
Dean or Supervisor:	<input type="checkbox"/>	<input type="checkbox"/>	
Area VP:	<input type="checkbox"/>	<input type="checkbox"/>	
VP for Finance:	<input type="checkbox"/>	<input type="checkbox"/>	

The VP for Finance will send a copy of the approved form to Payroll and Information Technology Services.