

NORTHLAND COMMUNITY AND TECHNICAL COLLEGE

Authorization and Annual Review for Cellular and Other Mobile Computing Devices

MnSCU System Procedure 5.22.2

Northland Community and Technical College may provide a cellular and/or other mobile computing device to an employee if it is determined to be a necessary business expense under one or more of the criteria on this form. Employees must complete this form upon initial request for a cellular or mobile computing device. This requirement for a completed form also applies to any purchases to be made with department funds. In addition, forms pertaining to specific devices must be submitted on an annual basis. *A separate form must be completed for each cellular or mobile computing device requested. Completed forms should be returned to Business Services.*

Please check one: _____ Initial Request, Date _____ Annual Review, Date _____

1. Please identify the mobile device for which approval is requested:

- _____ laptop/tablet/notebook computer
- _____ iPad/Kindle/eReader
- _____ cellular phone
- _____ smartphone (e.g., Blackberry, iPhone, Android)
- _____ wireless data device (e.g., data modem, Mi-Fi access point)
- _____ other; explain _____

2. Eligibility criteria. Select all that apply:

- ☒ Availability of the device and service is integral to the performance of specific duties within the employee's job description. Explain: _____

- ☒ A substantial portion of the employee's work is conducted outside of the building(s) where the employee is assigned to work. Explain: _____

- ☒ The employee does not have an assigned office or workspace and needs to be contacted on a regular basis by college personnel for assigned services or to provide needed information. Explain: _____

- ☐ It is a job requirement that the employer be able to reach the employee outside of the employee's normal work hours. Explain: _____

3. Is there a wireless/cellular service plan associated with the device?

- _____ No
- _____ Yes, Type of Service (check all that apply)
_____Voice _____Data _____Texting Cost Center(s) to charge _____
 - Attach the desired phone and plan information with this form. Phone and plan information is available by contacting the Business Office.

EMPLOYEE ACKNOWLEDGEMENT

I verify that the cellular or mobile computing device, and any applicable cellular service, is needed as described above and authorized under MnSCU Policy 5.22, MnSCU System Procedure 5.22.1 and MnSCU System Procedure 5.22.2. I acknowledge that I have received [MnSCU System Procedure 5.22.2 Cellular and Other Mobile Computing Devices](#) and [MnSCU Board Policies 5.22 Acceptable Use of Computers and Information Technology Resources](#) and [MnSCU System Procedures 5.22.1 Acceptable Use of Computers and Information Technology Resources](#) and I understand that I am responsible for reviewing it and complying with the procedure requirements.

I further acknowledge that the procedure:

- _____ contains a section on Employee Responsibilities including agreeing to return the device upon request by the supervisor or upon the end of employment.
- _____ contains a section on Personal Use of a Cellular Device and Plan that states personal use is prohibited except in the case of essential use, as defined by the procedure.
- _____ contains sections on 'Monthly Review of Invoices' and 'Annual Review'.

Employee's Printed Name

Employee's Signature

Date

*****Forward to Supervisor***

SUPERVISORY APPROVAL & ACKNOWLEDGEMENT

I verify that the above employee's need for a cellular or mobile computing device is compliant with MnSCU System Procedure 5.22.2. I acknowledge that I will review the employees' monthly cellular charges and retain documentation of this form, making available to Administration upon request. I will notify Administration upon the employee's resignation/termination of employment and return the device to the Director of Purchasing.

Supervisor's Printed Name

Supervisor's Signature

Date

*****Forward to Administration***

ADMINISTRATION AUTHORIZATION

Administrator's Printed Name

Administrator's Signature

Date

*****Forward to Business Services***
*****Business Services will provide copy to IT***