



Authorization and Annual Review for Cellular and Other Mobile Computing Devices
Minnesota State System Procedure 5.22.2

Southwest Minnesota State University may provide a cellular and/or other mobile computing device to an employee if it is determined by the University to be a necessary business expense under one or more of the criteria on this form.

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, mifi access point)
___ other; explain

2. Eligibility criteria. Select all that apply:

- Availability of 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 university 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 Account number(s) to charge
Attach the desired phone and plan information with this form. Phone and plan information is available by contacting the Purchasing Clerk, Christy Johnson, at extension 6215.

(Continue to back of page)

EMPLOYEE ACKNOWLEDGEMENT I verify that the cellular or mobile computing device, and any applicable cellular service, is needed as described above and authorized under Minnesota State Policy 5.22, Minnesota State System Procedure 5.22.1 and Minnesota State System Procedure 5.22.2. I acknowledge that I have received [Minnesota State System Procedure 5.22.2 Cellular and Other Mobile Computing Devices](#) and [Minnesota State Board Policies 5.22 Acceptable Use of Computers and Information Technology Resources](#) and [Minnesota State 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 in compliance with Minnesota State System Procedure 5.22.2. I acknowledge that I will review the employee's 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 Purchasing.

Supervisor's Printed Name

Supervisor's Signature

Date

****Forward to Administration**

ADMINISTRATION AUTHORIZATION (President's Cabinet Member)

Administrator's Printed Name

Administrator's Signature

Date

Original to Director of Purchasing ___
Copy to Technology Services ___