

**For illustrative purposes only.
THIS IS A 5-PLY FORM AND MUST BE OBTAINED FROM THE
FINANCE DEPARTMENT.**

**Atlantic Cape Community College
5100 Black Horse Pike
Mays Landing, NJ 08330**

Cell Phone Authorization Form

This form should be used for Method One: College-Provided Device under College Policy No. 607.

Authorization Form/Agreement

Must be completed and signed by both the employee and Dean.

A College-provided cell phone or communications device is justified for these reasons (mark all that apply):

- This employee must be readily accessible in the event of an emergency.
- This employee is frequently away from access to traditional land-based phone services.
- This employee needs to be accessible after normal working hours.
- This employee's job duties are critical to the operation of the college and immediate response is needed.
- This employee's job requires the employee to be mobile with direct office contact.
- Other _____

I have read and understand ACCC Policy No. 607 Cell Phone/ Communications Device Policy. I understand that the College-provided communications device issued to me is to be used for College-related business purposes only and that the call detail records are subject to audit.	<u>Approval Signature</u>				
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Employee Signature</td> <td style="width: 50%; border: none;">Date</td> </tr> </table>	Employee Signature	Date	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Dean</td> <td style="width: 50%; border: none;">Date</td> </tr> </table>	Dean	Date
Employee Signature	Date				
Dean	Date				
Print Name:	CWID				
Department:	Date:				
Account Number Charged:					

Date device assigned to employee: Type of device assigned:
ITS signature: