



Division Cell Phone Request Form:

Employee Name: _____ Position: _____

Department/School: _____

Account to be charged: _____

Choose one:

1. iPhone _____

2. Android _____

**Manager of Technology will make contact with current models and prices*

Business Justification:

Employee certification and acknowledgement:

I certify that the cell phone will be used for my business usage and if it is no longer required, I will notify my supervisor accordingly and return the cell phone to the Technology Department for reassignment.

I acknowledge that I must delete any personal related information that may be on the device prior to disposal or upon ceasing to work for St. Thomas Aquinas Roman Catholic Schools; and the Division is not responsible for any personal information left on the device when surrendered.

I acknowledge that I am responsible for any excessive charges for cellular use: voice, data, or texting, not related to business use; or resulting from failing to obtain an out-of-country cellular plan.

Employee signature: _____ Date _____

Supervisor signature: _____ Date _____

The Supervisor is responsible for an annual review of the business needs for a cell phones to determine if the needs have changed or if any should be discontinued.

❖ *Once complete please scan and email to the Director of Finance and Business for review and to complete the process for all cell phone requests.*