

**Personal Wireless Communication Allowance Authorization Form**

Any devices used to communicate through voice or data, require the purchase of a service or plan through a third party provider, and easily lend themselves to both business and personal use, are considered Personal Wireless Communication devices. The most common examples are cellular telephones, tablet computers (referred to as pads or tablets), wireless network cards (air cards) and personal digital assistants. Please read the Personal Wireless Communication Policy for further information.

NSU may provide an allowance to an employee who continues to meet the eligibility requirements and employee responsibilities as outlined in policy. Responsibilities of the employee include:

- For cellular telephones, provide NSU the phone number within five days of authorization.
- Be available for communication during those times specified by management.
- Select a wireless carrier and plan that meets the job requirements.
- Inform the university when the eligibility criteria are no longer met or when the wireless service has been changed (cancelled or decreased in cost).
- Provide a copy of the first page of the phone bill or other proof of a wireless service plan, at initial authorization and on an annual basis, in order to verify that the wireless plan meets the allowance criteria.

**Allowance calculation:**

Cost of Voice Minutes	Estimated % of Minutes Used for Business	Voice Minutes Allowance
Cost of Text Messages	Estimated % of Messages Used for Business	Text Message Allowance
Cost of Data Plan	Estimated % of Data Used for Business "*****"	Data Plan Allowance
Cost of Device/Line	Estimated % of Device Used for Business	Device Allowance

**Total Allowance Authorized**  
(Maximum of 75% of Plan Cost or \$100, whichever is less)

Employee Name \_\_\_\_\_ ID Number N \_\_\_\_\_

Device/Phone Number \_\_\_\_\_

*By signing this, I agree to follow the Personal Wireless Communication Device policy.*

\_\_\_\_\_  
Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing this, I authorize this allowance and agree there is a business need for a personal wireless device.*

\_\_\_\_\_  
Account Sponsor Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Vice President / President Signature \_\_\_\_\_ Date \_\_\_\_\_