**TENNESSEE STATE UNIVERSITY**

**CELLULAR TELEPHONE/STIPEND REQUEST FORM**

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ID#: T**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DEPARTMENT:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TITLE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EFFECTIVE DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOAP:** Fund\_\_\_\_\_\_\_\_\_\_Org\_\_\_\_\_\_\_\_Program\_\_\_\_

**TYPE OF DEVICE:** The above-named (and/or attached-listed) employees require the following cellular device for the performance of official duties and responsibilities:

 Cellular telephone stipend at $50 monthly **[**[**Extra Service Pay Request**](http://www.tnstate.edu/hr/forms.aspx) **(ESP) and** [**Budget Revision form**](http://www.tnstate.edu/businessoffice/budgetoffice.aspx)**(s) must be attached]**

 Radio

 Department-pooled cellular telephone [Attach list of others/all in this shared/group plan]

 Personal digital assistant (PDA) stipend @ $100 monthly

**[**[**Extra Service Pay Request**](http://www.tnstate.edu/hr/forms.aspx) **(ESP) and** [**Budget Revision form**](http://www.tnstate.edu/businessoffice/budgetoffice.aspx)**(s) must be attached]**

**JUSTIFICATION:** This request is justified as follows:

Required to perform emergency responder duties for law enforcement with communications needs that cannot be met with other available alternatives, such as pagers or radios

Required to respond to critical system failures or service disruptions

Required for immediate communication capability to protect the safety of students, employees, or the general public

Required to *routinely* travel off-campus on university business

Cannot meet communications needs with other available alternatives, such as pagers or radios

Other/Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPROVALS:** The employee acknowledges by signing below that he/she has read the Tennessee State University policy on cellular telephone, to which this form is Attachment A, and agrees to abide by its provisions. The employee also confirms that he or she is responsible for verifying with the Payroll Office when and if the phone or service the employee receives a stipend for has been terminated. Failure on the part of an employee to notify his/her supervisor of termination or reduction of cellular telephone use/service constitutes a **terminable offense** if the employee continues to receive a stipend.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Head Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice President Date

**DISTRIBUTION: *(1) POOLED* or RADIO** plan – The Department in which the employee works will to retain ORIGINAL for files. **(2) *STIPEND*** plan – The ORIGINAL will go to the Department and forward COPY with ESP form and BUDGET REVISION form to Budget Office