

THE UNIVERSITY OF ALABAMA

Communication Device Supplement Enrollment Form

Enrollment

Port number from employer-provided plan

Current cell phone number

Name (Last, First, MI)

Department

Department Contact

Cancellation

Change

Position Number

Campus Wide ID (CWID)

Work Telephone

Department Contact email address

I request approval to enroll in The University of Alabama communication service supplement plan. I have read and understand the appropriate policy on communication device supplements as well as the employee responsibilities listed below.

I also understand that the current supplement will NOT be part of my base salary. The supplement will be paid on the monthly payroll for services in the same month.

Note: The stipend can only be charged to the FUND/ORGN/PROG where the employee's permanent salary is charged.

Date to Begin Allowance: _____

Please choose appropriate amount for the supplement. *(Select supplement option to cover business use of your personal wireless device)*

___ \$25 – Monthly allowance (Bi-Weekly amount \$11.54)

___ \$50 – Monthly allowance (Bi-Weekly amount \$23.08)

___ \$60 – Monthly allowance (Bi-Weekly amount \$27.70)

___ \$75 – Monthly allowance (Bi-Weekly amount \$34.62)

___ \$80 – Monthly allowance (Bi-Weekly amount \$36.92)

___ \$90 – Monthly allowance (Bi-Weekly amount \$41.54)

___ \$100 – Monthly allowance (Bi-Weekly amount \$46.16)

___ \$120 – Monthly allowance (Bi-Weekly amount 55.39)

___ \$_____ Other – Monthly allowance (written justification must be attached if above \$120)

Equipment

___ \$_____ Equipment stipend for net actual costs not to exceed \$200 (Receipt must be provided)

- | |
|--|
| 1. <input type="checkbox"/> I do not have a university issued cell phone at this time. |
| 2. <input type="checkbox"/> I do have a university issued cell phone and have submitted a disconnect notice to Telecommunications to have cancelled. (When the response to these statements is #2, the form will be sent to Telecommunications for verification of the disconnect notice and the Communication Allowance will not begin until the confirmation is received in Payroll Services.) |

Employee Responsibilities:

1. The employee receiving an allowance must provide to his/her Department the number to the communication device within five working days of the activation of the number.
2. The employee is personally liable for contract stipulations with carrier including payment of all expenses incurred (including long distance, roaming fees and taxes). In the event that an employee leaves the position which qualified for the allowance, he/she continues to be responsible for the contractual obligations of the communication device carrier.
3. The employee receiving an allowance must notify his/her department head within five working days of the inactivation of the communication service or in the event the device is lost or stolen.
4. The employee receiving an allowance from The University of Alabama may not receive reimbursement from The University of Alabama for use of communication device or service.
5. No arrearages or partial months will be paid.
6. Information to be provided to Telecommunications per the following scenarios:
 - a. Cancel UA wireless contract: provide cell phone number and permission from his/her Department to cancel.
 - b. Porting UA wireless contract cell phone number to another carrier: provide cell phone number and permission from his/her Department to port the number.
 - c. Convert UA wireless contract to personal contract with the same carrier: provide cell phone number and permission from his/her Department to convert and complete and return Employee Assumption of Liability (AOL) form to Telecommunications office for signature. (Obtain AOL form by emailing: Stiteler@ua.edu)

As a security measure, employee acknowledges the University may be called upon to “wipe” all data from the phone, in the event that the device is lost, stolen, or employee is terminated. Such a “wipe” may include data beyond the data stored on the University servers, including personal photos, communications, etc. Employee consents to such a “wipe” and waives any claims related to the same.

Effective October 1, 2010, the University servers are set to archive and track only interactions with the University outlook account (contacts, calendar, UA email). The University does not track or archive text messages or phone logs.

Please forward the form for approvals in the order below:

Employee Signature

Date

I certify that the above employee meets the Stipend Eligibility Requirements as stated in the policy.

Department Head / Supervisor Approval

Date

If Cell Phone stipend is approved, funding will be automatically provided from the operating pool at month end based on actual charges for non-Contract and Grant and Cost Share Funds.

Signature of Department Budget
or Fiscal Representative

Date

Contract and Grant Approval (if applicable)

Date

Telecommunications Approval (applicable only
if a change is made to a University issued phone)

Date

Payroll

Date