

**SUNY POTSDAM CELLULAR TELEPHONE REQUEST FORM:**

This form is to be filled out by the requestor, signed by the appropriate authorities and returned to the Telecommunications Manager.

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

BUILDING: \_\_\_\_\_ ROOM NO: \_\_\_\_\_ OFFICE PHONE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

CELLULAR TELEPHONE NUMBER: \_\_\_\_\_

**JUSTIFICATION FOR SERVICE:**

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

**EQUIPMENT AND COST OF EQUIPMENT REQUESTED:**

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

**APPROVALS:**

DEPARTMENT HEAD: \_\_\_\_\_ DATE: \_\_\_\_\_

DEAN OR UNIT HEAD: \_\_\_\_\_ DATE: \_\_\_\_\_

PROVOST OR VICE PRESIDENT: \_\_\_\_\_ DATE: \_\_\_\_\_

\_\_\_\_\_

This information is required to establish the most cost effective rate plan for the user.

Estimated monthly use (Minutes): \_\_\_\_\_

Area(s) where cellular telephone will be used: \_\_\_\_\_

Length of time service is needed: \_\_\_\_\_

The TelCom Manager will propose the appropriate rate plan to the requestor, upon agreement, the requested cellular phone and agreed upon plan will be ordered. The TelCom Office will return a copy of the attached to the requestor with their telephone.

TELECOMMUNICATIONS MANAGER: \_\_\_\_\_

DATE: \_\_\_\_\_

**TELCOM DEPARTMENT USE ONLY:**

DATE ASSIGNED: \_\_\_\_\_

CELLULAR TELEPHONE NUMBER: \_\_\_\_\_

ESN NUMBER: \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_

MODEL NUMBER: \_\_\_\_\_

ACCESSORIES: \_\_\_\_\_

CONTRACT LENGTH: \_\_\_\_\_

CONTRACT DATES: \_\_\_\_\_

RATE PLAN: \_\_\_\_\_

ASSIGNED BY: \_\_\_\_\_

When the appropriate information has been entered the Telecommunications Manager will sign the contract and return it to the provider. The cellular telephone and a copy of the contract will then be delivered to the requestor. The TelCom Office will retain the original contract.