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**CELL PHONE, BLACKBERRY AND/OR WIRELESS DEVICE USAGE A
ACKNOWLEDGEMENT FORM**

Employee Name (PRINT): _____

Employee Signature of Acknowledgement:
(Signature means employee has read and understands the policy)

Date:

Type of Device (Check One Below)

- Blackberry Phone Number:
- Cell Phone Phone Number:
- Wireless Device Device Number:

Justification of the Need for the Cell Phone, Blackberry, or Wireless Device:

Department Head or Elected Official Approval Signature: _____

One copy is kept in the Department and one copy is sent to Human Resources to file in the employee's personnel file.