

**YOSEMITE COMMUNITY COLLEGE DISTRICT**  
Electronic Device Agreement

You are being entrusted with a Yosemite Community College District cell phone/PDA/wireless air card/pager or other electronic device. This device is provided to you based on your need to communicate District business when not near a District landline. Your signature below indicates that you have read and agree with the terms of this agreement:

1. I understand that my use of this electronic device incurs a debt for Yosemite Community College District and that the primary purpose of this device is to conduct District business.
2. The District may purchase a cell phone/PDA/wireless air card/pager or other electronic device for my use, in which case it is the property of the District. I agree to return the cell phone/PDA/wireless air card/pager or other electronic device immediately upon termination of employment for any reason or when otherwise requested by the Chancellor's Cabinet or the Controller. If it is lost or stolen, I will immediately notify the Controller's office.
3. In consideration of being authorized for District use of this electronic device, I agree that Yosemite Community College District may obtain records maintained by the service provider related to my use of this device.
4. I understand that my need for this device and the cost of the plan will be reviewed and approved by my unit budget manager and the Chancellor's cabinet as indicated by a change in circumstances and annually at a minimum.
5. I understand that I will be required to comply with the following internal control procedures designed to limit the District's liability: The District will pay the cost of the plan authorized by the Chancellor's cabinet member. Initially, the District will pay the entire monthly bill in full and any charges in excess of the base monthly amount will be my financial responsibility. The base monthly amount will include the authorized monthly service plan charges, taxes, surcharges and regulatory fees. If there are excess charges, they will also send me an action slip, requesting that I reimburse the difference to the District, via the Controller's office, within five business days of the date of the action slip. If the bill comes directly to me, I will submit the bill to Accounts Payable for payment and reimburse the District as noted above. If I fail to reimburse the excess amount in a timely manner, my electronic device privileges may be terminated.
6. I understand that this completed and signed agreement must accompany the requisition for the service for this device.

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

(see reverse)

**JUSTIFICATION**

The above employee, \_\_\_\_\_ (print employee's name) is justified in requesting a District cell phone/PDA/wireless air card/pager or other electronic device and monthly service plan due to the following job responsibilities:

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

Based on this employee's need for a cell phone/PDA/wireless air card/pager or other electronic device to conduct District business, I recommend the following plan:

Cell Phone, PDA, wireless air card      Service Provider: \_\_\_\_\_  
or Pager (circle one)

Number of Minutes/Messages: \_\_\_\_\_ Monthly Service Charges: \_\_\_\_\_

\_\_\_\_\_  
Unit Budget Manager

\_\_\_\_\_  
Date

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**AUTHORIZATION**

I approve the above recommendation:

\_\_\_\_\_  
Chancellor's Cabinet Member

\_\_\_\_\_  
Date

I do **not** approve the above recommendation:

\_\_\_\_\_  
Chancellor's Cabinet Member

\_\_\_\_\_  
Date

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