

## Facilities Management Cell Phone Agreement

The Facilities Management (FM) Cell Phone Program is designed to enhance employee communication, efficiency, and responsiveness by providing a mobile phone and cover the associated monthly service costs for eligible employees. The use of this phone is governed by the terms outlined in this agreement.

### Employee's Responsibility

Department-issued cell phones must be kept in good working condition and will be replaced when necessary. FM will provide one Otterbox case and screen protectors and will replace as needed. If a cell phone is damaged while not protected by the required Otterbox case and screen protector, the employee will be responsible for the cost of repairs or replacement. Chargers may be replaced with department funds as needed.

### Data Security

Employees should update their cell phones regularly to protect against security threats. To safeguard both personal and company data, employees must use a secure login and avoid connecting to public Wi-Fi networks.

### Device

- New department phone: \_\_\_\_\_ order date: \_\_\_\_\_
- Bring your own phone. The employee bears all costs for the phone.

### Phone Number

- New/current phone number \_\_\_\_\_
- Transfer in a personal cell phone number

### Opt-out

- Opt-out. The employee must have a working phone to complete job duties, and bears all costs for the phone. The employee may opt in at any time.

If I end employment prior to end of this BYUH cellphone contract. I will be financially responsible for the remainder of the contract and will continue payments w/ personal funds. In the event of an involuntary separation, Human Resources will process the transfer, during which time the employee may be without the phone for approximately one week.

By signing below, the employee acknowledges that they have read, understood, and agree to abide by the terms and conditions outlined in this cell phone agreement and the FM Cell phone Policy/

\_\_\_\_\_  
Employee Name

\_\_\_\_\_  
Signature and Date

\_\_\_\_\_  
Issued by

\_\_\_\_\_  
Signature and Date

### For Office Use

- Contract transferred to employee at the end of employment.
- Date: \_\_\_\_\_
- Verified by: \_\_\_\_\_