

PAYROLL SERVICES**Monthly Communication Allowance Enrollment**

(only available to First Responders or those individuals conducting mission critical University business.)

Name (Last, First, MI)_____
(UIN)_____
Cell Phone #_____
Employee Work Phone_____
Employee Email Address_____
Department Account Number

The following allowances are for Communication Service Plans as noted in [WTAMU Communication Allowances Standard Administrative Procedure](#).

Action Requested:

Monthly Communication Plan Allowance Options:

NEW RENEW CHANGE CANCEL **Allowance Requested:***Telephone/PDA Services*

_____ \$60 – Monthly communication service allowance voice/data

_____ \$90 – Monthly communication service allowance voice/data/added features.

Employee Responsibility:

I have read the [WTAMU Communication Allowances Standard Administrative Procedure](#) and I understand the associated Employee Responsibilities. In addition, I understand that these allowances are considered taxable compensation required tax withholdings and are **NOT** my base salary.

Non-Exempt (hourly) employees should not utilize their cell phone or any other telecommunications device for work purposes outside normal work hours and days, unless authorized by their supervisor and compensated for the time performing duties. This means any work outside of their scheduled work hours. In the event this happens, the employee is required to record the time on their time sheet.

Contact Payroll Services at extension 2082 if you have any questions regarding this guidance.

I certify that I am a First Responder or REQUIRED to conduct mission critical University business.

Employee Signature_____
Date_____
Department Head Signature_____
Date

Privacy Notice: State Law requires that you be informed of the following (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

Send to: Payroll Services, OM309 payroll@wtamu.edu**FAX: 806-651-2113**