

**CELLULAR PHONE ORDER FORM**

<p><b>Device User:</b> <i>(Please print clearly)</i></p> <p>First name: _____</p> <p>Last name: _____</p>	<p><b>Request type:</b></p> <p><input type="checkbox"/> New Activation</p> <p><input type="checkbox"/> Upgrade    <input type="checkbox"/> Cancellation</p> <p>Cell number: _____</p>
<p><b>Campus:</b> <i>(Maine System Employees please choose Campus you are affiliated with)</i></p> <p><input type="checkbox"/> UMA   <input type="checkbox"/> UMF   <input type="checkbox"/> UMFK   <input type="checkbox"/> UM   <input type="checkbox"/> UMM   <input type="checkbox"/> UMPI   <input type="checkbox"/> USM</p>	<p><b>Ship to Address:</b> <i>Cellular Services at UMS Campuses</i></p> <p>Street: _____</p> <p>City/State: _____</p> <p>Zip: _____</p>
<p>Department Name: _____</p> <p>Office Phone: _____</p> <p><b>Dept. Billing Representative</b></p> <p>Name: _____</p> <p>Email: _____@maine.edu</p>	<p><b>Service Providers &amp; Plans:</b></p> <p><input type="checkbox"/> <b>AT&amp;T</b>    <input type="checkbox"/> <b>Verizon</b></p> <p>Smart Phones-unlimited text &amp; data, with a pool of shared minutes</p> <p><input type="checkbox"/> 400 shared    <input type="checkbox"/> 600 shared</p> <p><input type="checkbox"/> 1000 shared    <input type="checkbox"/> Unlimited</p> <p><input type="checkbox"/> <b>US Cellular</b></p> <p><input type="checkbox"/> <i>Basic Flip Phone</i></p> <p><input type="checkbox"/> Local \$3.50/month - \$.03/min</p> <p><input type="checkbox"/> National \$7.50/month - \$.03/min</p> <p><input type="checkbox"/> \$15/month -\$.03/min</p> <p><input type="checkbox"/> \$.05/min pay as you go</p> <p><input type="checkbox"/> Unlimited</p> <p><input type="checkbox"/> <i>SmartPhone</i></p> <p><input type="checkbox"/> 2GB Data</p> <p><input type="checkbox"/> 5GB Data</p> <p><input type="checkbox"/> Unlimited</p> <p>Today's Date: _____</p>
<p>Device: <i>(Include Manufacturer, Model, Storage (GB), Color)</i></p>	
<p>Price: <i>(See Administrator for pricing)</i>    \$ _____</p>	
<p>*User Signature: _____</p> <p>*Dept. Approver Name: _____</p> <p>*Dept. Approver Signature: _____</p>	
<p align="center"><b>*REQUIRED: This form must be signed and approved by authorized department purchaser</b></p>	
<p align="center">CHARTFIELD INFO FOR MONTHLY BILLING:</p> <p align="center">_____ - 6 4 0 0 1 - _____ - _____ - _____ - _____ - _____</p> <p align="center">Dept. Code    Default Acct.    Class    Fund    Program Code    Project Code    Op Unit</p>	

*All plans and/or devices are for University departments and are for business use only. For more information on proper mobile phone and device use see APL-VII at:*

<http://www.maine.edu/pdf/VII-DCellularTelephone.pdf>

*By signing this form you are agreeing to the appropriate use stated in APL-VII.*

**Completed forms MUST be emailed to:  
cellular.services@maine.edu, to be processed.**