

REQUEST FOR NEW MOBILE DEVICE STAFF USER FORM – INFORMATION SERVICES

PLEASE COMPLETE & RETURN TO: **IT SUPPORT DESK, INFORMATION SERVICES,
ROOM C31, MERCHISTON**

YOUR DETAILS			
Title(Prof/Dr/Mr/Mrs/Ms)	Forename	Surname	Department
Email Address:	Contact Tel No.	Room No.	Campus
REQUEST DEVICE			
Please indicate which category of device you require by ticking the boxes below: Select the device you require from the 'Mobile Device Price List' found on our 'Mobile Phones at Edinburgh Napier University' page at http://staff.napier.ac.uk/services/cit/telecommunications/Mobile/Pages/UniversityOwnedDevices.aspx			
Mobile Phone	<input type="checkbox"/>	Datacard: 10mb <input type="checkbox"/> 30mb <input type="checkbox"/> 250mb <input type="checkbox"/>	
SIM card	<input type="checkbox"/>		
NON STANDARD DEVICES / ACCESSORIES			
Make	Model	Additional requirements	
REPLACEMENT DEVICE - <i>complete this section only if you are requesting a replacement for an existing device</i>			
Current Mobile No.		Current SIM No.	
Current device Make/Model		Reason for replacement	
CHARGING & AUTHORISATION - <i>this section must be completed by the budget holder</i>			
Allocate device to Folder / Cost Code:	Device will appear on the bill as "<Forename> <Surname>" unless stated otherwise here:		
Print Budget Holder Name:	Budget Holder Signature:	Date:	

FOR INFORMATION SERVICES USE ONLY

RMS Call Ref:	Date Logged:
Allocated to BEN:	