

White - Property Accountability
 Green - Information Technology
 Yellow - Business & Finance
 Pink - Department
 Golden - Employee



**MISSISSIPPI VALLEY STATE
 UNIVERSITY™**

REQUEST FOR A REPLACEMENT/RETURN A CELL PHONE

Name of Person Requesting: _____

Replacement/Return Cell Phone Number: _____

E-mail Address: _____

Name of Department: _____ Departmental Phone # _____

Reason for returning cell phone: _____

Employee Signature	Date	Dept. Head Signature	Date

Requesting Replacement: Yes No

Old Cell Phone	Replacement Cell Phone
Serial #:	Serial #:
MVSU #:	Cost:
Type of Phone:	Type of Phone:
Acquisition Date:	MVSU #:
Date Returned:	Acquisition Date:

Information Technology

Date Returned: _____ Received By: _____

Approval			
Director of Information Technology	Date	Vice President for Business & Finance	Date
Director of Property Accountability	Date	Property Accountant	Date

Lost or stolen devices must be reported to University Police first, and a copy of the police report must be attached.