

REQUISITION FOR NEW MOBILE PHONE



Please complete this form and e mail it to:
mobiles@jcu.edu.au

User Details: (i.e. Name of the person/s using the mobile phone)

SURNAME:

FIRST NAME:

Is this phone for an existing mobile service: Y/N **Existing mobile service number:**

POSITION:

DIVISION, SCHOOL OR DEPARTMENT:

Do you wish to have this mobile number published in the JCU Internal Telephone Directory YES/NO

HANDSET TYPE REQUIRED:

ACCESSORIES REQUIRED:

DATA PACK REQUIRED:

DELIVERY ADDRESS:

MONTHLY BILL TO BE SENT TO:

ACCOUNT DETAILS:

Posting code for charging of:

Purchase Costs:

Call Charges:

Authorised Signatory:

(Name - please print)

Signature _____

Date _____