



HARVARD

MEDICAL SCHOOL

Mobile Phone Stipend Eligibility Form

Name of supervisor submitting request:			
Harvard phone number of supervisor submitting request:			
Harvard email address of supervisor submitting request:			
HU ID of staff member:		Name of staff member:	
Department:		Job title of staff member:	
<i>HMS BYOP payment is a monthly non-taxable stipend applied in individual cases where a staff member is required to use their personal mobile phone for work purposes. This stipend is intended as compensation for incremental costs on the staff member's mobile phone and is not considered income. Payment will be made the first paycheck of each month and requires annual recertification. Initial payment is subject to regular payroll deadlines and may be in a subsequent check.</i>			
Effective Date of stipend:		Earning Code: MDS	Amount: \$50.00

Provide the departmental coding for the stipend charge. Note: Object code applied by PeopleSoft.

Tub	Org	Object Code	Fund	Activity	Sub Activity	Root
		8150				

Reason staff member requires mobile phone stipend (check all that apply):	
A. 24/7 access employees: day to day job responsibilities require routine response to urgent (immediate action required) University business at any time of the day or night – e.g., addressing student/lab safety issues, answering media requests, handling on-call server operations, etc.	
B. Mobile employees: job requires routine field work and need to communicate real time with office to give or receive direction – e.g., property assistants, IT field techs.	
C. Frequent travelers (defined as at least 30 travel days per year).	
D. Other business cases proposed and justified by direct supervisor and approved by Ad Dean (or EVP in the case of Central Administration); must meet at least ONE of the following criteria and must include explanation.	
a. Role requires staff member to routinely respond to urgent (immediate action required) University business while staff member is away from the office. Must include explanation below.	
b. Role requires staff member to be routinely available while in remote locations. Must include explanation below.	
c. Other business case. Must include explanation below.	
E. Explain business necessity as indicated in D (above).	
Signature of supervisor submitting request:	
<i>I certify that this request is a business necessity in compliance with the University's Mobile Phone Policy</i>	
Signature of Executive Dean or Designee	