



## iLEAD Lancaster

### *Employee BYOD Cell Phone Policy*

*Board Approved: March 24, 2020*

iLEAD Lancaster extends its employees the privilege of using smartphone and tablets of their choosing at work for their convenience. iLEAD Lancaster reserves the right to revoke this privilege if users do not follow BYOD agreement outlined below as well as the School Communication and Technology Use Policy outlined in the Employee Guidebook. Additionally, employees whose job duties require them to use a cell phone for business purposes are eligible for a monthly reimbursement. This agreement is intended to outline the terms of the monthly reimbursement and to protect the security and integrity of iLEAD Lancaster data and technology infrastructure.

- 1. Policy:** Employees whose job duties include the need for cell phone will receive a reimbursement to cover business-related costs associated with using their personal cell phone.
  - a. iLEAD Lancaster will not provide a reimbursement of an amount greater than the employee's current service plan.
  - b. The cell phone service is personally owned and may be therefore be used for both *personal* and *business* calls.
  - c. As a general rule, cell phones should not be selected as an alternative if other means of communication are available to the employee—e.g. land lines, radio phones, walkie-talkie. Employees who are able to use such alternative means for all communications necessitated by their job duties, and therefore do not need to use their cell phones for work purposes, are not eligible to receive the cell phone reimbursement.
  
- 2. Cell Phone Reimbursement:**
  - a. **Eligibility:** Employees eligible for a cell phone reimbursement generally include department heads, supervisors, and full-time employees whose job duties regularly require emergency call back, irregular work hours or other job-related factors that require the employee to utilize a cell phone to perform their job duties. If any employee not otherwise eligible for cell phone reimbursement under this policy believes that he or she believes that he or she needs to use a personal cell phone to conduct iLEAD Lancaster business,

the employee should contact his or her department head immediately to discuss whether he or she qualifies for a reimbursement.

- b. Reimbursement Amount: The standard monthly cell phone reimbursement amount shall be as follows for all iLEAD Lancaster Employees unless job classification, work location, and duties do not require employee-provided cell phone reimbursement or reimbursement at different rate.

**School/ Site Director- \$50**  
**Office/ Business Manager- \$35 FT**  
**Outreach Coordinator and other Administrative-FT \$35 PT \$17.50**  
**Educational Facilitator- FT \$25 PT \$10**  
**Student Support- FT \$25 PT \$10**

- c. Reimbursement Payment: The approved cell phone reimbursement will be included in the employee's paycheck as a monthly stipend, provided the employee attests to the amount being less than the cost of their cell phone service. The reimbursement is not an increase to base pay, and will not be included in the calculation of percentage increases to base pay due to salary increases, promotions, etc.
- d. Employees who believe they are not being adequately reimbursed for work related usage of their personal cell phones are encouraged to consult with their department head, and should be prepared to submit their detailed cell phone bill indicating which charges and calls are business-related for reimbursement of actual charges that exceed the reimbursement amount.

### **3. Department Supervisor Responsibilities:**

- a. Determine if reimbursements should be changed, continued, discontinued, or if an additional amount is needed;
- b. Notify Employee Services if the employee no longer requires a benefit due to responsibility changes or termination.

### **4. Employee Responsibilities:**

- 1. Any employee who receives a cell phone reimbursement must provide their department head and the School's Technology Department with their current cell phone number and immediately notify both parties if the number changes.
- 2. The cell phone service is personally owned and may therefore be used for both personal and business calls.
  - a. Employees may choose the cellular service provider and plan design of their choice.
  - b. If available from the school's contracted cellular service provider, employees may be able to take advantage of discounts for their personal service plans if they utilize the same provider as the school.
- 3. An employee with a cellular telephone reimbursement must maintain an active cell phone contract for the life of the reimbursement.
- 4. iLEAD Lancaster will not be responsible for any fees associated with any change or cancellation of the employee's cell phone plan. For example, if an employee resigns, and no longer wants to retain the current cell phone contract for

personal purposes, any cancellation charges will be the employee's responsibility.

5. Employee acknowledges iLEAD Lancaster Employment Guidebook- the phone numbers of employees who receive the cell phone reimbursement will be added to the iLEAD Lancaster email signature line, business cards, published in an internal iLEAD Lancaster directory, and may be provided both internally and externally for business purposes.

#### **5. Independent Contractors, Consultants and Non- Employee Board Members:**

- a. Independent Contractors, Consultants, and Non-Employee Members are not eligible for a cell phone reimbursement, and should submit requests for reimbursement for any properly reimbursable expenses pursuant to the procedures outlined in their individual contracts with iLEAD Lancaster.

#### **6. Acceptable Use of Company-Owned Devices and Electronic Resources:**

- a. iLEAD Lancaster defines acceptable business use as activities that directly or indirectly support the business of iLEAD Lancaster.
- b. Employees may be blocked from accessing certain websites during work hours/ while connected to the corporate network at the discretion of iLEAD Lancaster.
- c. Devices may not be used at any time to:
  - Store or transmit illicit (i.e. pornographic, obscene or sexually explicit) materials.
  - In any manner illegal (i.e. contrary to local state, or federal laws)
  - In any way that is harassing or offensive on the basis of any protected category, abusive, or threatening, defamatory, or intentionally damaging or violating the privacy of information of others.
  - Employees may use their mobile device to access the following company- owned resources: email, calendars, contracts, documents, etc.
  - Employees do not have any expectation of personal privacy in any matters stored in, created, received, or sent using company-owned devices or electronic resources.
  - iLEAD Lancaster has a zero-tolerance policy for texting or emailing while driving and only hands-free talking while driving is permitted.

#### **7. Devices and Support**

- a. Connectivity issues are not supported by the iLEAD Lancaster IT Department; employees should contact the device manufacturer or their carrier for operating system or hardware-related issues.

#### **8. Security**

- a. It is strongly encouraged that employees install "Find My Phone" application or another loss prevention application in case of loss or theft. It is the responsibility of the employee to change passwords on all iLEAD

Lancaster Schools accounts, such as email accounts, as soon as loss or theft occurs.

- b. In order to prevent unauthorized access, devices are to be password protected when not in use.
- c. Devices are not to be shared ownership.
- d. Upon termination of employment, all data belonging to iLEAD Lancaster Schools is to be removed from device.

**iLEAD Lancaster**  
**Employee Agreement for Cell Phone Reimbursement**  
**Benefit of Employee-provided Cell Phone for**  
**Business Usage**

Employee Name \_\_\_\_\_  
Employee Address \_\_\_\_\_  
City State Zip \_\_\_\_\_  
Work Location \_\_\_\_\_  
Effective Date \_\_\_\_\_  
Phone Number \_\_\_\_\_ Initial for Use of personal no. \_\_\_\_\_  
Alternate Number (if using) \_\_\_\_\_ Initial for Use of Alternate no. \_\_\_\_\_

I agree this Cell Phone Reimbursement Benefit is provided to me to reimburse me for the official iLEAD Lancaster Business usage of my personal cell phone. My level of service may be reviewed annually to determine if the Cell Phone Reimbursement Benefit is appropriate. I certify this Cell Phone Reimbursement Benefit amount is adequate for iLEAD Lancaster business conducted on my device and is not greater than my monthly basic service plan and that I will notify iLEAD Lancaster when my basic service plan is reduced below my Cell Phone Reimbursement Benefit amount. This Cell Phone Reimbursement Benefit may not exceed the monthly service amount. If monthly cell service is less than the Cell Phone Reimbursement Benefit, then I agree to notify my supervisor to revise the amount of Cell Phone Reimbursement Benefit.

I agree to notify iLEAD Lancaster if my business usage significantly changes for a sustained period. I will notify my supervisor in writing, as soon as practicable and the Cell Phone Reimbursement Benefit amounts may be adjusted. If iLEAD Lancaster determines that there's no longer a business need for me to receive the Cell Phone Reimbursement Benefit, the Cell Phone Reimbursement Benefit will cease. If I separate from iLEAD Lancaster employment, the phone number assigned to my device will remain my property.

I am responsible for safeguarding my device, including any data on the equipment, and controlling its use. In the interest of safety, I will exercise appropriate care and caution while using the device and I will be in compliance with current iLEAD Lancaster policies, state and federal laws while using a communication device when driving a motor vehicle.

I have read the iLEAD Lancaster Policy and Procedures concerning the Cell Phone Reimbursement Benefit of business use of my personal communication device and agree to its provisions. I also agree that my number will be added to my iLEAD Lancaster email signature line, business card, published in an internal iLEAD Lancaster Directory and may be provided both internally and externally for business purposes. I may alternatively use a phone number (example Google Voice) which rings on my personal device. This agreement will go into effect during the calendar month in which it was approved and cannot be retroactively applied.

_____	_____
Employee Signature	Date
_____	_____
Supervisor's Signature	Date
Supervisor's Name & Title _____	

**Human Resources Use Only:** Employee Qualifies for \_\_\_\_\_ monthly cell phone Cell Phone Reimbursement Benefit