

**University of Wisconsin-Whitewater
Cellular Activation Form
AT&T Wireless Service - Tier 2**

1. Name of Individual: _____
Department: _____
Office Telephone Number (262) 472-_____

2. Plan, Equipment and Number Portability

- AT&T Standard Plan w/Discount**
 - Plan Name _____
- Transfer existing number to new service**
 - Current Cellular Provider _____
 - Account Number _____
 - Phone Number to Transfer _____
 - Account Password (if any) _____
 - SSN _____
- Cellular Equipment Option (if purchasing new device)
 - Manufacture/Model _____

3. Billing Options (Please note that under Tier 2, you are personally responsible for receiving and paying your AT&T Wireless bill).

- | | |
|---|--|
| <input type="checkbox"/> Send my bills to this address:

_____ | <input type="checkbox"/> Automatically charge my bills to a personal credit card:
<input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> Discover
Card Number _____
Expiration Date __/__/__
CCD _____ Zip Code _____ |
|---|--|

Send Form To: UW-Whitewater MG208A
Attn: Nick Ciesinski
800 W Main Street
Whitewater, WI 53190

-----Do Not Write Below This Line-----

5. Signature: _____ Date: _____
Authorized State Purchasing, Telecommunications, or Designee

6. Print Name: Tom Jordan Phone: (262) 472-7794