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|--|--------------------------------|--------------------------|
|  <b>executive optical</b> | <b>COMPANY PHONE POLICY</b>    |                          |
|  | Doc Code: HRD-PM-ES-2023-003   | Revision number: 00      |
|  | Dept.: HRD – Employee Services | Effective Date: 06/01/23 |

#### I. POLICY STATEMENT:

The Company has adopted this policy to govern the use of company issued mobile phone and/or sim cards being used for business purposes.

Company Issued phone and/or sim cards are issued to employees who deal primarily with clients and/or customers and are required to conduct business during and/or after business hours. Other company phone is issued to employees, Branch or Department based on job functions and requirements of the position or Areas with the approval from the Human Resources and Office of the President.

#### II. ELIGIBILITY:

| POSITIONS  | ISSUANCE   |
|--|--|
| Officers and Managers (HO Managers, AOMs and up) | Upon deployment (check approved MRF)                                     |
| Other rank (depending on scope of work)          | Depending on the request of Department Manager and approval of HR and OP |

| AREAS              | ISSUANCE                        | ACCOUNTABLE              |
|--------------------|---------------------------------|--------------------------|
| Department/Section | 1 unit per Department / section | Supervisors / Specialist |
| Branch             | 1 unit upon branch opening      | Branch Manager           |

#### III. PLAN DETAILS:

All eligible employees will be issued 1 Company phone and 1 sim card that is:

1. Smart phone
2. Sim card – plan that is with 3GB data, free call and text to all network and free call to landline
3. No employee or Department shall use a "prepaid sim" card for business purposes. Any liquidation will not be honored not unless the unit has been issued by the Company that is being used for financial and logistics purposes such as Gcash, Paymaya, Grab and Pickaroo as established by the Marketing Department.

#### IV. USE OF SERVICES:

1. Qualified employee shall be issued 1 unit of mobile phone and simcard that will be used for business purposes along with an Accountability Form - see annex "A".
2. Employees are not allowed to download and play games, watch video, use social media or applications that are not related to work or to employees' job function.
3. Employees are also restricted to use the company phone such as roaming, GPRS, etc otherwise required or needed to perform the job function and with approval of immediate superior.
4. Department Manager may also request additional unit/s depending on the needs of his/her employee to perform the job. The Department Manager may submit a letter of request justifying the need subject to the approval of HR Department and Office of the President. (see attached company request form – Annex "B")







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5. Using employees Personal Mobile Phone is strictly prohibited however, if the employee opted to use his/her personal device the company is not liable for any costs, losses or damages that it may incur.

### V. ACCOUNTABILITY:

1. It is the responsibility and accountability of the employee to take care and monitor the usage and safekeep of the company issued phone. Any additional cost / overlimit fees or charges that will arise every billing period shall be shouldered by the assigned employee.
2. Lost, stolen or damage company phone or sim card must be reported immediately to immediate superior and HR Department. Any cost that will arise due to stated incident shall be shouldered by the assigned employee.
3. It is the responsibility of the Branch Managers to safekeep the company issued phone. Any additional cost / overlimit fees or charges that will arise every billing period or damages shall be shouldered by the Branch Manager.
4. Purchasing Department is the only authorized body to negotiate cellphone agreement with vendors.

### VI. EMPLOYEE MOVEMENT:

1. For any employment movement:
  - a. Transfer of branch assignment: He or she must endorse the mobile phone to his/her replacement accordingly. An accountability form may be requested to HR Department to ensure proper transfer of accountability to replacement to be submitted to MIS for monitoring.
  - b. Separation of employment: The employee must endorse his/her company issued phone to immediate superior then to MIS. MIS should make sure that the unit is in good condition during the turn over. Once replacement or need to be issued to a new employee, the Department Head must secure a requisition form and for re-issuance.
  - c. It is also recommended to reissue the surrendered mobile number to the employee replacement or within the same Department for easier monitoring of messages and contacts.

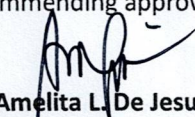
### VII. EFFECTIVITY:

This policy shall take effect immediately. Management has the right to add, amend, revise, or delete any portion of this policy as deemed necessary or advisable.


Prepared by:

  
**Kristina D. Ramos**  
Employee Services Manager

Recommending approval by:

  
**Ms. Amelita L. De Jesus**  
Director for Human Resources

Approved by:

  
**Ms. Rachelle Uy-Sim**  
EVP – Corporate Operations



## COMPANY PHONE REQUEST FORM

|          |  |            |  |
|----------|--|------------|--|
| NAME     |  | DATE FILED |  |
| POSITION |  | DEPARTMENT |  |

| NAME | POSITION | DEPARTMENT | PURPOSE |
|------|----------|------------|---------|
|      |          |            |         |
|      |          |            |         |
|      |          |            |         |

Phone and sim \_\_\_\_\_ Sim card only \_\_\_\_\_

Remarks \_\_\_\_\_

|  |                                       |  |
|--|---------------------------------------|--|
| Requested by:<br>_____<br>Department Manager | Checked by:<br>_____<br>HR Department | Approved by:<br>_____<br>Office of the President |
|--|---------------------------------------|--|

## COMPANY PHONE REQUEST FORM

|          |  |            |  |
|----------|--|------------|--|
| NAME     |  | DATE FILED |  |
| POSITION |  | DEPARTMENT |  |

| NAME | POSITION | DEPARTMENT | PURPOSE |
|------|----------|------------|---------|
|      |          |            |         |
|      |          |            |         |
|      |          |            |         |

Phone and sim \_\_\_\_\_ Sim card only \_\_\_\_\_

Remarks \_\_\_\_\_

|  |                                       |  |
|--|---------------------------------------|--|
| Requested by:<br>_____<br>Department Manager | Checked by:<br>_____<br>HR Department | Approved by:<br>_____<br>Office of the President |
|--|---------------------------------------|--|





## ACCOUNTABILITY FORM

| NAME:     |                                 | DEPARTMENT: |            |         |
|-----------|---------------------------------|-------------|------------|---------|
| POSITION: |                                 | DATE:       |            |         |
| QTY       | EQUIPMENT / DESCRIPTION<br>TYPE | MODEL NO.   | SERIAL NO. | REMARKS |
|           |                                 |             |            |         |

(Note: No transferring of item/equipment to other department without the knowledge of the HR Department)

I agree to accept liability for the item/equipment listed above. I am aware that if the item/equipment is broken, stolen or damaged; it is my responsibility to report to the HR Department. I understand that should any damages occur while the item/equipment is in my possession I will be held responsible and liable for the repair or replacement of the item/equipment due to my fault or negligence.

Received by: \_\_\_\_\_  
(Signature over printed name)

Date: \_\_\_\_\_

Verified by: \_\_\_\_\_  
(Department head)

Date: \_\_\_\_\_

Issued by:

Noted by:

\_\_\_\_\_

\_\_\_\_\_



# MANPOWER REQUISITION FORM

|             |  |                                  |  |
|-------------|--|----------------------------------|--|
| DIVISION:   |  | DATE FILED:                      |  |
| DEPARTMENT: |  | BRANCH:                          |  |
| JOB TITLE:  |  |                                  |  |
| JOB LEVEL:  |  | SALARY: (RECOMMENDED / STANDARD) |  |

EMPLOYMENT STATUS: ☐ PROBATIONARY ☐ CONTRACTUAL ☐ OUTSOURCED / AGENCY

SCHEDULE: ☐ OPEN FLEXY ☐ CWW ☐ REGULAR SCHEDULE

*SHIPPING  
SCHEDULE*

## I. MANPOWER REQUIREMENTS

### A. NEW POSITION ☐

Please state the need to establish such and the benefits that will accrue or the company.

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Budgeted: ☐ Yes ☐ No

If possible, the cost vs benefits should be presented hereunder.

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### B. REPLACEMENT - EXISTING POSITION ☐

Current Job description and Responsibilities

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Name of separated employee \_\_\_\_\_

Position: \_\_\_\_\_

Separation date: \_\_\_\_\_

### C. ADDITIONAL MANPOWER ☐

Present approved table of organization and justification for additional manpower

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## II. ISSUANCES AND OTHERS

### A. Company email address:

☐ YES ☐ NO

### B. Devise

☐ Laptop ☐ Desktop ☐ Mobile Phone

### C. Assigned Working Location

☐ Head Office ☐ Operations

Area: \_\_\_\_\_

## III. QUALIFICATIONS:

### A. Educational Attainment:

\_\_\_\_\_

Degree: \_\_\_\_\_

### B. Work related experience:

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### C. Skills needed:

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Trainings and Seminars (optional)

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