

Procurement Card (P-Card) Application

Cardholder Information

First Name:	
Last Name:	
Department:	
Email Address:	
Employee ID (M#):	
Last (4) SSN:	
Work Phone #:	
Cell Phone #:	

Spending Controls – For Approval Use:

Default Fund Org & Program code to be used. These codes may be adjusted as needed on the Transaction Log.

Fund	Org	Program
Single Purchase Limit (STL):		
Monthly Credit Limit:		

Default Limits are \$500 STL & \$1000 Monthly Limit

P-Card Application Approvals:

Cardholder Signature:	Printed Name:	Date:

Approver/Immediate Supervisor	Printed Name:	Date:

*Proxy Approver:	Printed Name:	Date:

**Proxy Approver is someone authorized to approve P-Card requests when Approver is unavailable*

VP/Provost Signature:	Printed Name:	Date:

Purchasing Use Only:

Verified:	Date:	Initials:
Benefit Eligible X4221		
Date Received:		

*****PLEASE NOTE: Changes to any of the above information request submission of a new application*****