



Purchasing Card Application Form II

Instructions: Applicant to complete form AND submit to their Chair, Dean or Director for review and signature AND approval and signature by their Vice President or Provost AND final approval and signature by the Vice President of Finance and Administration.

Applicant Name: _____ **Phone No:** _____

Department: _____ **Email Address:** _____

Title: _____ **Date Needed By:** _____

- *Spend Limit:** _____ \$500 (Single) to \$1,500 (Monthly) > STANDARD PCARD
(select only one)
- _____ \$1,000 (Single) to \$2,500 (Monthly) > Athletics
- _____ \$1,500 (Single) to \$3,500 (Monthly) > Admissions

****Limits will be aligned to the department's core function and employee's job responsibilities. Each Cardholder's spending habits will be audited quarterly for card limit adjustments up or down, accordingly. Final approval determined by the Vice President of Finance and Administration.***

Applicant Signature

Date

AND

Chair / Dean / Director (Print Name)

Signature

Date

AND

Vice President / Provost (Print Name)

Signature

Date

AND

Vice President Finance and Administration

Signature

Date