



# P- CARD AND TRAVEL CARD APPLICATION FORM

## COMPLETE INFORMATION IS REQUIRED

### CARD INFORMATION:

\_\_\_\_\_  
First Name (up to 12 characters)

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Last Name (up to 20 characters) \*

**A**  
\_\_\_\_\_  
University ID# (A # - with no dashes or spaces)

**A**  
\_\_\_\_\_  
Index Number (6 digits)

\_\_\_\_\_  
Title of Index to be charged (up to 19 characters)

\_\_\_\_\_  
Account Code (if account code needs to be defaulted)

\_\_\_\_\_  
University /Business Address (up to 36 characters)

\_\_\_\_\_  
City (up to 25 characters)

\_\_\_\_\_  
State (2 characters)

\_\_\_\_\_  
Zip (5 characters)

\_\_\_\_\_  
Zip Expansion (4characters)

\_\_\_\_\_  
Monthly Credit Limit

\_\_\_\_\_  
Single Transaction Limit

Regular P-Card

Travel P-Card

**\*Name is embossed on card**  
**\*\*Required only if department uses Reconciler**

\_\_\_\_\_  
Dept (DP Code)

\_\_\_\_\_  
College (CL code)

Cardholder May make changes to Index(es)

### AUTHORIZATION:

\_\_\_\_\_  
Card Reconciler/Receipt Attacher (Level 10)  
Name (Printed) \*\*

\_\_\_\_\_  
Card Reconciler/Receipt Attacher Email Address \*\*

\_\_\_\_\_  
Card Reconciler/Receipt Attacher USU ID # \*\*

\_\_\_\_\_  
Cardholder (Level 100) Signature

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Business Services (Level 200) Name Printed

\_\_\_\_\_  
Business Services Email Address

\_\_\_\_\_  
Business Services USU ID#

\_\_\_\_\_  
Department Head/Approver (Level 300)  
Name (Printed)

\_\_\_\_\_  
Department Head/Approver Signature

\_\_\_\_\_  
Department Head/Approver USU ID#

\_\_\_\_\_  
Department Head/Approver Email Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Index owner (name printed)

\_\_\_\_\_  
Index owner signature  
(if different than Cardholder)