The University of Arizona
Purchasing Card Individual Credit Card Application

New Individual PCard Application

Instructions – Complete form and obtain original signatures. Send to: USA Building, Purchasing Card Office 5th Flr.

Employee Information

Cardholder Name: _____ NetID: _____EMPLID:_____

Department Name: _____Dept. # _____

Cardholder Email: _____ Work Phone: _____

College: _____ Department: _____

Campus PO Box: _____Street Address: _____

City: _____ State: _____ Zip Code: _____-_____

Default Accounting number: _____ Default Object Code: 5490
(# must be listed under dept #)

Cardholder Controls/Enhancements

Travel Enhancement: ☐Y☐N PCard Plus Enhancement: ☐Y☐N

Single Purchase Limit: $_____ Monthly Purchase Limit: $_____
(up to $5,000) (up to $50,000)

No. Transactions/day: _____ No. Transaction/month: _____
(up to 50) (up to 500)

Reconciler Workgroup Information

Reconciler Workgroup Name: UA PCRD_____
Reconciler Workgroup Number: _____

Note: Purchasing Cardholder Agreement form signed by the Department Head or designee must be attached before sending to Purchasing.

PURCHASING CARD AGREEMENT

- The Purchasing Card is intended for small purchases that would normally be handled by mechanisms such as Blanket Purchase Orders or Stores blanket Purchase Orders, and is FOR OFFICAL USE ONLY.
- All purchases with this card must comply with the guidelines in the University of Arizona Purchasing Procurement Policies and Procedures Manual and applicable extramural funding agency restrictions.
- Transactions listed in the Purchasing Card Policy Manual under "Restriction/Non-Allowable Purchases" are prohibited.

- If the card is lost or stolen, the cardholder or responsible cardholder for the card must notify the Purchasing Card Administrator, the bank, and their Purchasing Card Liaison.
- The card should be temporarily suspended during the absence of a cardholder (i.e. Sabbatical leave, vacation, extended illness, etc.) by proper procedures/forms.
- Violation of any of the above procedures may result in revocation of all division or departmental procurement cards or personal liability or all of the foregoing.
- Purchasing Card Policy Classroom Training including PCard Exam, or review of on-line PCard Policy Manual and PCard Exam must be completed prior to receipt of PCard.
- Failure to complete/pass the PCard Policy Exam within 4 weeks of application submission will result in cancellation of application.

I agree to comply with the terms and conditions of this Agreement and the applicable provisions of the Purchasing Card Policy Manual. I acknowledge review of the PCard Policy Manual and the list of restricted items and confirm that I have read and understand and will comply with all the terms and conditions.

I agree to use this card for the University of Arizona approved purchases only and to NOT use the card to charge personal purchases. I understand that Individual Purchasing Cards cannot be shared. I understand that Department Purchasing Cards can be shared, delegated by the responsible cardholder for each transactions. I understand that the University will audit the use of this card and my department and I will be responsible for any discrepancies. Should I terminate employment with the University or transfer to another department, I will return the card to my Purchasing Card Liaison or the Purchasing Card Administrator or the bank. I further understand that improper use of this card may result in disciplinary action. I will contact the Department Liaison along with the Purchasing Card Administrator immediately if any unauthorized purchases appear on the card. I understand that the University of Arizona and the Department may terminate my right to hold and administer this card at any time for any reason. I agree to return the Card to the University immediately upon request. Should I fail to administer this card properly, I authorize the University of Arizona to deduct from my salary or from other amounts payable to me, an amount equal to the total of the improper purchases, together with interest, costs, expenses and attorney's fees. I also agree to allow the University of Arizona to collect any amounts owed by me even if I am no longer affiliated with the University.

Signature of Cardholder: _____ Date:_____

As Department Head or Designee, I approve the issuance of a Purchasing Card to this university employee. I agree to uphold and enforce all applicable policies for the University of Arizona, Arizona Board of Regents, applicable laws of the State of Arizona, and all applicable federal policies and procedures and to assure that the card is turned over to my Purchasing Card Liaisons immediately upon this employee's termination in my department. I agree that the department's budget will bear the cost of any misuse or loss resulting from the use of this card.

Department Head Printed Name: _____
Dept. Head Signature: _____ Date_____

Department Liaison Printed Name: _____
Department Liaison Signature: _____ Date_____

To be completed when PCard is picked up:

I hereby acknowledge receipt of Purchasing Card#: Last four digits_____

Signature of Cardholder: _____ Date_____