SUNY Cobleskill
Procurement / Travel Card / Net Travel Card Form

Procurement Card _____   **Travel Card** _____   **Net Card** _____

Complete this form to request that a new Cardholder be added to the system. The Cardholder should complete the fields listed below on the form, sign and date and forward to the supervisor. These cards are not for use by CAS, Research Foundation, Cobleskill Foundation, Alumni Association, Booster Club, or Student Government.

Name (Last, First, MI): _____

Title: _____

Department: _____

Building/Room: _____

Phone: _____   **SS #:** _____ **(Travel/NETCard Apps Only)**

SUNY Id #: _____   **NYS Id #:** _____ **(From Paystub for PCard App Only)**

Department Account Number: _____ **(State/IFR Funding ONLY)**

Fulltime Faculty Staff: YES   NO   **Part-time/Adjunct Faculty Staff: YES   NO**

                                          Dates of Service: _____

Comments and Justification: **(Justification must be given for issue of card.)**

_____

_____

_____

The user's signature on the form is acknowledgement that he or she will safeguard the system assets assigned to them and prevent unauthorized use of SUNY Cobleskill's Procurement/Travel/Net travel card system.

_____   _____
Signature   **Date**

Supervisor must sign the form. The supervisor's signature on this form is authorization to add the user to the computer system and confirmation that the user requires a Procurement/Travel Card/Net Card. The supervisor will immediately notify the Credit Card Administrator of user termination, transfer or misuse of the card.

_____   _____
Account Administrator/Supervisor Signature   **Date**

****

To be completed by the Business Office Only:

Date Entered in to Citibank: _____   Entered by: _____

Transaction Dollar limit   Monthly Dollar Limit

December 12, 2015 LLG