Effective Date: 08/08/2012

Cardholder Application-Travel Card (CA-TC)

Purpose:
Used, in accordance with the Travel Card Handbook, to identify a new cardholder for the corporate liability Travel Card.
A cardholder can be either an employee or affiliate fiscal staff.

Note: If traveling internationally, use this form to request the international version of the Travel Card. (It can also be used domestically.)

Applicant Information

Name:
Department:
Campus Phone:
Campus Email Address:
Campus Address
Line 1:
Line 2:
City, State, Zip:

HR Reporting Org #:
Employee ID # or POI #:

If applicant is not on University of Colorado payroll:
Any applicant who is not on the University’s payroll must have a Type 15 (Security Access) POI #.
If this has not been done, complete POI Worksheet (link below) requesting POI Type=Security Access; give worksheet to department sponsor for entry in HRMS.

http://www.cu.edu/employee-services/policies/add-person-poi-worksheet

Card Limit & Use

Indicate the maximum dollar amount that this applicant should be allowed to incur on the Travel Card (or international version of the Travel Card) within a single cycle period. The cycle period resets the 25th of each month.

☐ $3,500 ☐ Other Amount
If 'Other Amount,' identify dollar limit requested:

If requesting over $5,000, identify specific uses of card:

☐ Check box to request international version of the Travel Card

Training Requirements

You should receive your card within 10 business days after passing the following online SkillSoft courses:
• Travel and Travel Card Training
• Fiscal Code of Ethics

Certification and Approvals

I understand that this is a corporate liability card. As such, it is not to be used to pay for personal expenses or another employee's travel expenses. If I use the Travel Card (or international version of the Travel Card) for per diem meals in excess of the allowable amount, or for personal expenses, I must promptly reimburse the University the amount my reimbursable expenses don't cover. Furthermore, I understand that the improper or unauthorized use of this card may result in card suspension or cancellation with the possibility of employment suspension or termination.

Applicant Signature (required) Date

Authorizing Information

* Authorizing Name: Title/Position:
Email Address: Department:

* Authorizing name can be the Fiscal Manager, Department Administrator, HR Supervisor, Dean, Director, Chair or Department Head. Individuals cannot authorize their own application.

I approve the person named above to be a Travel Card or International Travel Card cardholder.

Authorizing Signature (required) Date

When all necessary signatures have been obtained:

Fax signed, completed form to: Procurement Service Center · 303.764.3434
Or, email scanned signed application to: procurement.card@cu.edu