

**Please provide the following information:**

Check type of card     Individual Card     Department Card

Index No. \_\_\_\_\_ Organization \_\_\_\_\_

Program \_\_\_\_\_ Fund \_\_\_\_\_

APPLICANT \_\_\_\_\_ Department \_\_\_\_\_

Building No. \_\_\_\_\_ E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

CARD COORDINATOR \_\_\_\_\_ Banner Username \_\_\_\_\_

E-mail \_\_\_\_\_ Phone Number \_\_\_\_\_

Default GL Account Number 72202

**The following signatures are required to process your application:**

APPLICANT            Signature \_\_\_\_\_            Print Name \_\_\_\_\_

DEPARTMENT HEAD    Signature \_\_\_\_\_            Print Name \_\_\_\_\_

OR

\*VICE PRESIDENT    Signature \_\_\_\_\_            Print Name \_\_\_\_\_

Date \_\_\_\_\_

*\*Vice President is for Department Head Cardholder Approval.*

**Send Completed Applications to the Office of Purchasing  
Attn: Procurement Card Administrator**