



Regent University Purchasing Card Application

Type of Card Requested & Spending Limit Restrictions:

Check one:	Type of Card	Description
<input type="checkbox"/>	Card A	Card is in the name of the employee and is for purchases less than \$1,500. Single Transaction limit \$1,500 Monthly Limit is \$10,000
<input type="checkbox"/>	Card B	Card is in the name of the employee. Job responsibility entails frequent travel. Single Transaction limit \$10,000 Monthly Limit \$25,000

Card Information:

Card Emboss Name: _____
Please list the name as it should be printed on the actual card.

Card Holder Information:

Card Holder/Reconciler Name: _____

Department Name: _____ Email: _____

Phone: _____ Mail Drop: _____ Cost Center: _____

Date of Birth: _____

Security Identifier Information:

Last 4 digits of SSN: _____

First 4 characters of mother's maiden name: _____

Card Approvals:

Justification for card: _____

Form Submitted by: _____
(Print Name) (Signature) (Date)

Approval Signature*: _____
(Print Name) (Signature) (Date)

(*This must be an authorized signer for your cost center.)

Return this form to Purchasing, ADM 116. Your application will be reviewed and subject to approval. If approved, card usage is subject to all terms and conditions of Regent University's Purchasing Card Holder Agreement.

The Purchasing and Accounts Payable offices reserve the right to limit the number of active purchasing cards and determine appropriate justification.