

Procurement Card Program Application & Agreement

PROCUREMENT CARD (P-CARD) PROGRAM APPLICATION

This form is used to request a P-Card to procure small-dollar purchases.

REQUESTER'S INFORMATION

Cardholder's Legal Name: _____
(Name must match government-issued ID)

CSUF Classification: _____ Campus Email: _____

Department Name: _____ Division: _____

CWID: _____ Employee ID: _____

Campus Phone #: (657) 278-_____ Cell Phone #: _____
(required for Instant Card requesters)

P-CARD INFORMATION

P-Card Descriptions:

One Card	Declining Balance (DB) Card (Short-Term)	Instant Card (For Student Travel)
A One Card may be used to make purchases of goods, supplies, and specific services. Credit limits are set at \$5,000/\$2,000 respectively.	A Declining Balance Card is a short-term (a fiscal year or less) card issued for a specific event or timeframe or until funds have been exhausted. DB cards are given a set credit limit that is reduced after every purchase and never reset to the original credit limit. Credit limits are set at \$25,000/\$5,000 respectively.	An Instant Card is a virtual card that allows students to purchase per diem meals on official CSUF travel. The Instant Card may remain open for six (6) months or less. The credit limit is \$500 or less. This card does not utilize or require a single purchase limit. Require cell phone or mobile device.

Select P-Card Type: _____ Duration: _____ to _____
(only required for DB or Instant Card requesters)

Monthly/Max Limit: _____ Single Purchase Limit: _____

Detailed justification is needed for credit limits above the set limits noted in the P-Card Descriptions (if applicable, attach additional supporting documentation):

CHARTFIELD INFORMATION

Default Fund: _____ Default Department Code: _____

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PROCUREMENT CARD (P-CARD) PROGRAM AGREEMENT

This agreement involves the Cardholder, the Approving Official, the Division Head's Direct Designee (if applicable), and the Division Head. All parties named in this document are accountable and subject to public scrutiny. These individuals uphold the Procurement Card (P-Card) Program Policies.

This document inherently serves as the chain of delegation of authority to purchase on behalf of the unit/department/college/division listed below. The individuals named must ensure the P-Card is used consistently with the CSUF mission, P-Card Program Policies, CSUF Policies, applicable laws, and ethical and risk reduction practices. The responsibilities include but are not limited to:

1. **Card Use:** The P-Card is used only for authorized University business expenses. Personal use is prohibited.
2. **Compliance:** Comply with all University policies and procedures related to the P-Card Program.
3. **Training:** Individuals newly assigned to a role must undergo initial training and biennial thereafter.
4. **Documentation:** Obtain transaction itemized receipts and provide a business purpose for each item purchased/transaction.
5. **Security:** Safeguard the P-Card and account number to prevent unauthorized use.
6. **Reporting:** Immediately report a lost or stolen P-Card to the University and the issuing bank.
7. **Reconciliation:** Reconcile P-Card transactions entirely and promptly.
8. **Disputes:** Resolve all discrepancies with the merchant/vendor first or the issuing bank if necessary.
9. **Separation:** Complete all pending expense reports and return/destroy the P-Card immediately upon employment separation or at the University's request.

CARDHOLDER ACKNOWLEDGMENT

I understand and agree to abide by the P-Card Program policies and procedures. I accept my fiduciary responsibility for charges made with my P-Card and understand I will be held personally/financially responsible for any abuse, misuse, or purchase of prohibited items. I acknowledge that I will perform all my responsibilities to reconcile, review, and submit timely and accurate documentation for the charges made with my P-Card. I understand that failure to do so will result in limit modifications, suspension, cancellation, revocation of my P-Card, and, in some cases, legal action. I will notify eBusiness should I no longer serve in my role, reassign, separate, or, for students, disenroll from the department/division or university.

Cardholder's Name: _____ Title: _____

Cardholder's Signature: _____ Date: _____

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RESPONSIBLE PERSON ACKNOWLEDGMENT

(only applicable to Instant Cards requests)

I understand and agree to follow the P-Card Program policies and procedures. I accept fiduciary responsibility for charges made with the P-Card(s) under my management. I understand I could be held responsible for any misuse or purchase of prohibited items. I will fulfill my responsibilities to ensure that P-Card expenditures are reconciled, reviewed, and submitted accurately and in a timely manner. I understand that failure to do so may result in suspension, cancellation, revocation of the P-Card(s), and potentially legal action. I will notify eBusiness if I no longer serve in my role, am reassigned, or separate from the department/division or university.

Responsible Person's Name: _____ Title: _____

Responsible Person's Signature: _____ Date: _____

Department/Division: _____ Email: _____@fullerton.edu

APPROVING OFFICIAL ACKNOWLEDGMENT

As an Approving Official, I understand my role and responsibilities per the P-Card Policies. I recognize I have the authority to certify purchases made by the Cardholder listed above and am to ensure all purchases are appropriate and comply with the P-Card Program Policies. I agree to manage unit/division funds by ensuring sufficient resources are available to support the purchases made with the Cardholder's P-Card. I understand that once I approve, I will retain equal responsibility for all transactions unless corrective action has been taken and documented with the eBusiness. I will ensure the Cardholder's documents are submitted promptly, follow the P-Card Policies if a Cardholder leaves or is reassigned, and notify eBusiness of any misuse or serious violations.

Approving Official Name: _____ Title: _____

Approving Official Signature: _____ Date: _____

Department/Division: _____ Email: _____@fullerton.edu

DIVISION HEAD OR DIVISION HEAD'S DIRECT DESIGNEE ACKNOWLEDGMENT

I understand the individual roles and responsibilities outlined in the P-Card Policies and acknowledge the delegation of authority to the individual named above. My signature certifies that I have reviewed and approved the Cardholder's P-Card Application and the agreement. I acknowledge that the Approving Official named in this document is the manager (MPP) who supervises the Cardholders listed above and has the authority to certify appropriate purchases made by the Cardholder.

Division Head or Designee Name: _____ Title: _____

Division Head or Designee Signature: _____ Date: _____

Department/Division: _____ Email: _____@fullerton.edu

Please submit the completed application and agreement form to eBusiness at eBusiness@fullerton.edu.