UNLV Procurement Card Program Cardholder Account Application								
New Card Application Individual Departmental Change Request Temporary Change Change Effective Until								
Cardholder Informat					_			
Cardholder Name (21 Characters): Or Department' name						Required by Bank One for Cardholder Security (This does not appear on a credit report)		
Email Address:						LAST 4 DIGITS of Social Security # of	r UNLV ID Number:	
Department: Bldg.		Room#	Ma	Mail Sort:		Date of Birth (MM/DD/YYYY):		
Procurement Card Liaison (if different from Cardholder):  Mother's Maiden Name or Password:								
The liaison will act on behalf of the Cardholder where record keeping and reconciliation are involved. This does not remove the Cardholder from liability for an improper reconciliation.						Work Phone Number: (702)		
Credit Card Informa								
UNLV Account Num	bers Fund (4)	Agency (3)	Org (4)	Sorg (Optional)		Credit Limits		
Primary Account: If you are not a signature			3 ( )			Monthly Credit Lim		
authority on this account, one of them must sign here:	X Fund (4)	Agency (3)	Org (4)	Sorg (Optional)		Single Purchase Lim (Maximum \$5,0)		
Backup Account:	, ,					Dollars Per Da (Option		
If you are not a signature authority on this account, one of them must sign here:	X					Transactions Per Da		
Primary and Backup accounts are required to process this application. However, you may use any account available to you for reconciliation.						Transactions Per Month: (Maximum Sixty)		
Hosting (Optional)	5 1/0	(0)	2 (1)	0 (0 !! !)				
Host Account:	Fund (4)	Agency (3)	Org (4)	Sorg (Optional)	hos	If this section is not signed by a Dean, or Vice President, hosting will not be pre-approved. In this instance, each host		
In order to receive pre-approval for hosting, a Dean or Vice President must sign here:	X				transaction will need to be reviewed and approved by the appropriate authority in accordance with the PCard Policy			
Application Authori	zation							
This Application must be approved by a Department Chair, Director, Dean, or Vice President. It must also be accompanied by a completed Cardholder Agreement. This form may not be self-endorsed.								
By signing this form, you grant the applicant authority to obtain and use a PCard as outlined in the UNLV Purchasing Card Manual. The department is responsible for approving all accounts used for transactions made against this card.								
Recommended by:	(Cardholder's supervisor)				Date:			
Approved by:  (Please Print)	(Dept. Chair / Director / Dean / Vice President)			Signature:		Date:		
DISBURSEMENTS L	ISE ONLY							
Reporting Hierard Level Numbers		Level 2 (President/Vice	е)	Level 3 (Division)		Level 4 (Sub-Unit)	Level 5 (Fin Office) - not in use -	
Application Approved		(Program Administrator)	Signa	ture:		D	ate:	

## **UNLV Procurement Card Program** Cardholder Agreement

The University of Nevada, Las Vegas is pleased to present you with the UNLV Procurement Card. It represents the university's confidence in you as a responsible employee of the university entrusted to safeguard and protect university assets.

## **Cardholder Agreement:**

Applicant Signature

I understand that all purchases are to be made for business use only and consistent with existing policies.

The PCard program is not intended to avoid or bypass purchasing or payment procedures and is not for personal use.

As a Cardholder, I agree to comply with the terms and conditions of this agreement and the stated provisions of the Purchasing Card User Manual made available on the Purchasing PCard website. I attest that I will be responsible for reviewing the online PCard Manual for updates and confirm that I have read and understand its provisions. I understand that the university is liable to the issuing bank for all charges made by me.

As the holder of this PCard, I agree to accept responsibility for the protection and proper use of this card as outlined in the agreement and the user manual. I understand that the university WILL review my use of this PCard. I understand that I CAN NOT use the PCard for the purchase of services without written permission from the PCard Program and that the purchase of such services shall be deemed an improper use of the PCard.

I further understand that improper or fraudulent use of this PCard may result in disciplinary action and/or personal liability. Should I fail to use this PCard properly, I authorize the university to deduct from my salary, or from any other amounts payable to me, an amount equal to the total of the improper purchases. I also agree to allow the university to collect any amounts owed by me, even if I am no longer employed by the university. If the university initiates legal proceedings to recover amounts owed by me under agreement, I agree to pay legal fees or collection costs incurred by the university in such proceedings.

I understand that the university may terminate my right to use the PCard at any time for any reason. I agree to return this card to the university immediately upon request or upon termination of employment.

Data:

Applicant dignature.		Date.						
Printed Name:		Campus Phone #:						
Department:	Mail Stop:	Email Address:						
Department Approval:								
As Department Chair/Director or Dean/Vice President, I approve the issuance of a PCard to this staff member and <b>assume overall responsibility for the card</b> . I accept the responsibilities for this card as are outlined in the Purchasing Card User Manual Section: Roles and Responsibilities -Department Head/Account Manager.								
Recommended By:	Aj	pproved by:						
Supervisor	(D	Dept. Chair / Director / Dean / Vice President)						
For completion with card distribution								
I hereby acknowledge receipt of the following procurement card:								
Number:	Ехр	Expiration Date:						
Signature:		Date:						