

CALIFORNIA STATE UNIVERSITY, FULLERTON

eBusiness Programs

Travel Card Application

Use this form to request a new Personal Liability Travel Card

This card is not valid for the purchase of goods or services

Cardholder's Name:

Telephone # (657) 278-

(Direct Extension)

CWID#:

Building/Room#:

Campus Email:

@fullerton.edu

Department:

Single Purchase Limit:

Monthly Limit:

Explanation for single purchase limit over \$1,000:

Have you ever had a Procurement Card revoked?

I hereby request a CSUF Travel Card and agree to abide by the policies and procedures governing the CSUF eBusiness Programs. I understand that failure to submit all required documents in compliance with Travel Card policy deadlines may result in revocation of my Travel Card. I understand that I will be personally/financially responsible for all transactions.

Cardholder's Signature:

Date:

Application Approval

I hereby approve this request for a Travel Card for the above named Cardholder. I certify that the above referenced Approving Official understands and accepts the role and responsibility as described in the respective program's policy and procedures.

Approving Official/
Department Head

Print Name

Title

Signature

Date

Division Point of
Contact/COO

Print Name

Title

Signature

Date

VP/VP Designee

Print Name

Title

Signature

Date

Contracts and Procurement Use Only

Processed by:

Date:

Card ID #:

EV

Database

ETC

Date/ID

ETC Email

Training Cert Received

Card Ready for Pickup