# **CCTC Globe LogoCENTRAL CAROLINA TECHNICAL COLLEGE**

#  **PURCHASING CARDHOLDER APPLICATION**

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| **Eligibility Requirements** 1. Applicant must be an employee of the College. 1. The approval of Department Head/Director and Vice President.
2. Employee must attend training session before Purchasing Card can be issued.
3. Signature on Cardholder Agreement (upon issuance of card).
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| **In order to process your application, you must complete the entire form. The request cannot be processed unless ALL information has been filled out. Print this form, have it signed by the department head/supervisor and vice president.** |
| SECTION 1: CARDHOLDER INFORMATION |
| Department Name – Write below | Department Telephone Number – Write below |
| **Cardholder Name:** | **Cardholder’s Banner ID:** |
| **Default Account Number (BANNER 5 digit ORG):** |
| As a cardholder, I will treat the CCTC Purchasing Card with at least the same level of care as my personal credit cards. The card will be maintained in a secure location and the card account number will be carefully guarded. I will be the only person entitled to use the card.I fully understand the intent of this program and will comply with all guidelines in the Purchasing Card Program manual as well as the College policies and procedures relating to the expenditure of funds. |
| SECTION 2: CARDHOLDER SIGNATURE |
| **Cardholder Signature** | **Date** |
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| I delegate tran I delegate transaction authority to the above cardholder and agree that the cardholder will comply with all guidelines in the University Pu Purchasing Card Program as well as CCTC policies and procedures relating to the expenditure of college funds. |
| SECTION 3: DEPARTMENT CHAIRMAN/HEAD SIGNATURE |
| **Department Chairman/Head Signature** | **Date** |
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| SECTION 4: VICE PRESIDENT |
| **Vice President Signature** | **Date** |
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