



**PCard Cardholder Application**

**A p p l i c a n t I n f o r m a t i o n**

<b>User Name:</b>	<b>First:</b>	<b>Last:</b>	<i>Name of user card is issued to.</i>
<b>Position Title:</b>			<i>User's position title or affiliation with SFC.</i>
<b>SF ID #:</b>			<i>SF employee identification number.</i>
<b>Department Name:</b>			<i>User's department.</i>
<b>Default Department Account:</b>			<i>Default account used when posting user's charges.</i>
	<b>Check Box if Grant</b> <input type="checkbox"/>	<b>Date Grant Expires:</b>	<i>Indicates if account is a grant and expiration date.</i>
<b>Campus/Center:</b>			<i>User's location.</i>
<b>Building/Room Number:</b>			<i>User's physical location within the campus/center.</i>
<b>Email Address:</b>			<i>User's email address for Pcard related information.</i>
<b>Campus Telephone Number:</b>			<i>User's campus telephone number.</i>
<b>Secondary Telephone Number:</b>			<i>User's secondary telephone number (i.e., cell or home)</i>

**S i g n a t u r e**

I approve this applicant to be issued a PCard and ensure that applicant is an employee in good standing with Santa Fe College.

<b>Budget Authority Name/Title:</b>			
<b>Signature:</b>		<b>Date:</b>	

*The Following Section to be Completed by PCard Administration Personnel*

<b>LIMITS:</b>			<i>Define default limits</i>
<b>CARD PROFILE:</b>			<i>Define card profile</i>
<b>PCard Administration Signature:</b>		<b>Date:</b>	

**RETURN TO: Purchasing, F-46, Attn: D Shlafer**