



UCSC TRAVEL & ENTERTAINMENT CORPORATE CARD

EMPLOYEE APPLICANT INFORMATION - Please print or type:

First Name	Middle Name	Last Name
		\$
Last 4 digits of SSN	Date of Birth	Anticipated monthly Travel & Entertainment expenses
Mailstop / Business Address - street		
Home/Billing address - street		
City	State	Zip
()	()	
Home Phone	Business Phone	Employee Number

EMPLOYEE UNDERSTANDING / SIGNATURE / APPROVALS

Employee Applicant requests that he/she be issued a U.S.Bank Visa Corporate Card. U.S. Bank may obtain credit information concerning Employee Applicant for the sole purpose of issuance, renewal and/or replacement of the U.S. Bank Corporate Card. In consideration of the issuance and the use of the U.S. Bank Corporate Card, the Employee Applicant agrees to be bound by the U.S. Bank Corporate Cardholder Agreement accompanying the card, as amended by U.S. Bank from time to time, for all charges incurred by the use of the card or the related account. Creditor is U.S. Bank National Association ND.

I understand and agree to the following terms (Please initial on each line):

- _____ This card is to be used for business related charges only
- _____ Payment in full needs to be remitted upon receipt of statement
- _____ I am liable for all charges on the card; non-payment will adversely affect my personal credit rating

Should I default on payment of this card:

- _____ The card will be cancelled and no new card will be issued
- _____ I will **NOT** be eligible for any future UCSC cash advances

Employee Applicant Signature / Date

Financial Manager Signature / Date

E-Mail:

E-Mail:

Dept. Head (Director level or above) APPROVAL- Signature / Date

Submit completed & approved application to: Travel Administrator, Mail Stop: Accounting Office

ACCOUNTING OFFICE USE ONLY - COMPANY INFORMATION Banner Vendor No.:

University of California Santa Cruz 1156 High Street Santa Cruz CA 95064

Processing: 1 9 0 3 2

Company

Division

Department

Company Program Administrator: Signature / Date

Acct. Setup: Bank Via: online fax PPS verified / updated SS1 / SS2 FTMVEND Traveler Emailed

Acct. Closure Bank PPS SSI FTMVEND Email List Verification Letter Date: