SANTA FE COLLEGE

PCard Cardholder Application

Applicant Information

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

Signature

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

Budget Authority Name/Title:			
Signature:		**Date:**	

The Following Section to be Completed by PCard Administration Personnel

LIMITS:			*Define default limits*
CARD PROFILE:			*Define card profile*
PCard Administration Signature:		**Date:**	

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