CAL POLY POMONA UNIVERSITY PROCUREMENT CARD PROGRAM Participant Application

Submit form to the Procurement Card Program via pcard@cpp.edu

Eligible employees to obtain a state procurement card (p-card) include full-time staff or faculty with a minimum appointment of 6 months or longer. Employee(s) <u>not eligible</u> for a procurement card includes temporary employees (appointment less than 6 months), Cal Poly Pomona Foundation employees, Associated Students Inc. employees, retired annuitants, volunteers, and student assistants.

Cardholders are delegated the authority to make low-value purchases up to the limits specified below, preferably \$1000 or less, (including tax, shipping and handling) without the approval of the Procurement Services. High limits may be subject to obtain approval from the Procurement Card Administrator. They are responsible for making direct contact with vendors and ordering commodities using the procurement card. Cardholders will prepare a monthly reconciliation of all p-card charges including receipts/invoices and obtain their Approving Official's signature. The Approving Official is responsible for reviewing and approving all P-Card Monthly Reconciliation before it is sent to the Procurement Card Program.

Cardholders will be notified when the card is available, and a training session will be scheduled.

Cardholder Name:(Please type or print)		_ Title:	(Please type of	print)	
		_ Date:			
Department:		Division:			
Building Number:		Room Number:			
Cardholder EMAIL:			Telephone Ext:		
Limit:		Single Tran	saction Limit:_		
Account (6 digits)	Fund (5 digits)	Dept ID (5 digits)	Program (4 digits)	Class (5 digits)	
				ignature	
s Name:					
		tuno or print			
ipation Approva	•	type or print)			
Dean:					
	(Please	type or print)			
Date: res 5 to 7 business days. Please note that inter-campus mailed-in documents may take longer to process of					
	Limit: Account (6 digits) nust be at least or chartfield fund are s Name: pation Approvation:	Limit: Account (6 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits) Fund (5 digits)	Division:	Date: Division: Room Number: Telephone Ext: Single Transaction Limit: Account (6 digits) Fund (5 digits) Dept ID (5 digits) Program(4 digits) Program(4 digits) Program(4 digits) Sust be at least one level above the cardholder and must have suchartfield fund and department listed on this form. S Name: (Please type or print) (Please type or print)	