

# TRAVEL CARD APPLICATION

COMPLETE INFORMATION IS REQUIRED

## CARD INFORMATION:

\_\_\_\_\_  
First Name (up to 12 characters) (Embossed on card)

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Last Name (up to 20 characters) (Embossed on card)

\_\_\_\_\_  
Employee's University ID # (A# - with no dashes or spaces)

## TRAVEL ONLY

(This will be embossed below cardholder name)

\_\_\_\_\_  
Index Number (6 digits)

\_\_\_\_\_  
University or Business Address (up to 36 characters)

\_\_\_\_\_  
City (up to 25 characters)

\_\_\_\_\_  
State (2 characters)

\_\_\_\_\_  
Zip (5 characters)

\_\_\_\_\_  
Zip Expansion (4characters)

\_\_\_\_\_  
Monthly Credit Limit

\_\_\_\_\_  
Single Transaction Limit

\_\_\_\_\_  
Home Phone (10 characters)

\_\_\_\_\_  
University Phone (10 characters)

## AUTHORIZATION:

\_\_\_\_\_  
Cardholder / Employee Signature

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head – Typed or Printed

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Card Manager Email Address

\_\_\_\_\_  
Card Manager Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Card Manager USU ID #

\_\_\_\_\_  
Travel Office Approval  
(Submit application to Kelly Olsen @ UMC 2400  
for approval)