



BYU Campus Card Application

Administrator: Rachel Engler (801)422-5390

Cardholder/Custodian Information

First Name	Last Name
Department & College Name	BYU Employee ID (9 digits) BYU Net ID
Campus Address	Email Address
Business Phone	Do you have any other active Campus Cards? Yes No

Card Information

<u>Card Name (maximum of 30 char.)</u>	<u>Choose one of the following:</u> <u>All campus locations</u> <u>Print/Copy Only</u>	<u>Monthly Spend Limit (default \$20,000)</u>
1. _____		_____
2. _____		_____
3. _____		_____
4. _____		_____

(attach a list if there are additional cards needed for this custodian)

Additional Instructions *(please list any special instructions you may have)*

BYU Campus Card User Agreement for: _____
(Cardholder/Custodian Name)

I agree to comply with the following conditions regarding use of the Campus Card issued to me.

1. Protecting the Card
 - a. I will keep the card safeguarded at all times. If the Card is lost or stolen I will immediately contact the ID Center at 801-422-5092.
 - b. I understand that the Card may be used only for authorized University purposes. No personal purchase are authorized. I understand any misuse or abuse of the Card may result in disciplinary actions and personal liability for the offender, and may be grounds for termination or possible criminal prosecution.
 - c. If I transfer to a different department, retire, or terminate employment (voluntary or involuntary) from BYU, I agree to immediately surrender and cease use of the Card.

2. Documenting Card Transactions
 - a. I agree to review all transactions that are incurred on the Card in a timely manner through Y-expense and to submit sufficient documentation justifying a valid business purpose for each purchase. Failure to submit this documentation, or to report it timely, may result in suspension of the Card. I also understand that I may be held personally responsible for undocumented or improperly documented purchases.
 - b. All Card transactions are subject to internal control reviews and audits designed to protect the interests of BYU. By accepting the Card, I agree to comply with these reviews and audits.
 - c. I agree to resolve any disputed charges, returns and adjustments, and ensure the merchant applies the proper credit to the Card. A Card user should not accept cash or in-store credit for returned items.

Will this card be checked out to others in the department? Yes No

If yes, I agree to the following conditions.

3. Department Custodian Responsibilities
 - a. I agree to maintain a log that documents each time the Card is used by the custodian or checked out to whomever the custodian designates.
 - b. I agree to instruct others in the usage of the card and ensure that it is used only for valid, authorized and necessary BYU purchases.
 - c. I agree to report immediately to the Campus Card Administrator any misuse or suspicious transactions on the Card.

My signature below indicates that I have read and understand this agreement.

Cardholder/Custodian Signature / Date

Supervisor Name (Type or Print Name)

Supervisor Signature / Date

College/Division Controller Name (Type or Print Name)

College/Division Controller Signature / Date

*Please send this application to idcenter@byu.edu.
It generally takes one week to create and mail the card. You will be notified when it is sent.*