

**TEXAS A&M INTERNATIONAL UNIVERSITY  
PROCUREMENT CARD CARDHOLDER  
APPLICATION/APPROVAL FORM**

Applicant's Name \_\_\_\_\_

Department Name \_\_\_\_\_ Bldg/Room# \_\_\_\_\_

Department's FAMIS Code: (Four alpha characters) \_\_\_\_\_

Work Number: \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ SSN # \_\_\_\_\_

I understand that I must attend a training class and agree to follow the procedures set forth in the Cardholder's Purchasing Guide. I further agree to adhere to the departmental delegated authority guidelines and to sign the Cardholder Purchasing Card Agreement before a Purchasing Card will be issued. Upon the issuance of card, I understand that the improper use of this card may result in disciplinary action, up to and including termination of my employment.

\_\_\_\_\_  
Applicant's Name (Print/Type)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

I hereby approve the applicant, listed above, for issuance of a Texas A&M International University Procurement Card. I agree that the account used will have funds sufficient to any and all charges made by this individual. I have assigned the duty to assure monthly reconciliation of all statements will be done as required and all documentation retained. I understand that the improper use of this card by this individual may result in disciplinary action, up to and including termination of the applicants employment.

\_\_\_\_\_  
Department Head/Supervisor (Print/Type)

\_\_\_\_\_  
Department Head/Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Procurement Card Program Administrator

\_\_\_\_\_  
Date