

## **PCARD REQUEST FORM**

Name of Cardholder
Department
Title
Employee ID
WPI Email
WPI Phone
Cardholder Cell Phone
Mailing Address for PCard
Department Manager & Title

## **Terms of PCard Agreement**

- 1. I acknowledge that I have read, understood, and agreed to comply with all the terms and conditions for the use of my WPI PCard as described in the WPI PCard Guide. I understand that the PCard is not an entitlement nor reflective of title or position. The WPI PCard is provided to employees for the purchase of goods, services and travel for WPI business. I have read and understood WPI's business expense and travel policies as posted on the Controller's Office website.
- 2. If personal charges are inadvertently made using the WPI PCard, I will reimburse WPI within 14 days of incurring this charge. If I do not reimburse WPI within 14 days, I understand WPI reserves the right to withhold the amount due from my pay. Repeated use of the WPI PCard for personal charges may result in cancellation of my card.
- 3. The WPI PCard is the property of WPI. I understand that WPI may revoke my right to use the card at any time for reasons that may be considered in WPI's best interest. I am the only person who will use my WPI PCard. I agree to surrender the card immediately upon request from my supervisor or the WPI PCard Administrator. Misuse or fraudulent use of my card may result in disciplinary action, up to and including termination. I am liable for any transactions from misuse and the money owed may be withheld from my pay.
- 4. Before activation, I will register for the following mobile alerts at <a href="https://cardportal.works.com/gar/">https://cardportal.works.com/gar/</a>
  - Suspicious activity
  - Distance from zip
  - Merchant state/country/type
  - % of credit limit
  - Change in personal information
  - Request for new card

I also agree to respond to and resolve any alerts when received.

- 5. I understand WPI PCard Charges will be cleared in Workday by creating an expense report and all expense reports will be reviewed by the Cost Center Manager, your manager and the Controller's office. I am responsible for providing the appropriate Cost Center, Fund, Spend Categories and other Worktags as necessary in Workday. I will resolve any discrepancies by contacting the supplier and Bank of America in a timely manner. I understand that transactions in Workday are to be cleared within 14 days of the goods or services being received and if a charge is in dispute, I will notify Bank of America. I understand my right to dispute expires in 60 days and I will be personally responsible to reimburse WPI should a loss be incurred.
- 6. I agree to notify Bank of America (1-888-449-2273) immediately should my card be lost or stolen.
- 7. Prior to foreign travel, I will call the phone number on the back of the WPI PCard for the purpose of fraud prevention. I understand foreign travel on a research grant must be pre-approved by Sponsored Programs Accounting.
- 8. I agree to surrender the card two weeks prior to leaving employment with WPI. I will clear all transactions in Works in accordance with the WPI PCard Guide and this agreement prior to my departure. Upon leaving employment with WPI, I understand I am liable to reimburse the University for any unauthorized or prohibited transactions.

	/ /
Cardholder Signature	Date
	,
Supervisor Signature	Date

Please send signed document to pcardadmin@wpi.edu