



Corporate Travel Card Program
 Cardmember Application
 Optional Cash Advance Enrollment
 Central Billing

Send completed application to: Accounts Payable
 101 Braddock Road
 105 Hitchins Admin Bldg.
 Frostburg, MD 21532

*** Forms must be typed or clearly printed. Signatures should be adobe enterprise e-signatures or wet signatures. ***

DINERS CLUB CORPORATE TRAVEL CARD ENROLLMENT (REQUIRED EMPLOYEE ACCOUNT INFORMATION)

Legal Name:

First Name: _____ Middle: _____ Last Name: _____

Department Name: _____ Office Address: _____

Office Phone: _____ Cell Phone: _____ Campus email: _____@frostburg.edu

Employee ID: _____ Date of Birth: _____ Password (No Special Characters): _____

Per Transaction Limit Requested: \$ _____ (maximum of \$5,000) **Monthly Credit Limit Requested: \$** _____

TO DESIGNATE ANOTHER PERSON TO MANAGE YOUR ACCOUNT, PLEASE INDICATE:

Name: _____ Relationship: _____

Office Phone: _____ Campus email: _____@frostburg.edu

CASH ADVANCE ENROLLMENT (OPTIONAL- RESTRICTED TO ATHLETIC TEAM TRAVEL WITH APPROVAL FROM THE VPAF)

Applicants responsible for Athletic Team travel may enroll in the Cash Advance program. With Cash Advance access, cash for business expenses is as close as the nearest Automated Teller Machine (ATM). All you need is your Diners Club Corporate Card and your Personal Identification Number (PIN) to access cash at Cirrus® ATMs worldwide, 24 hours a day, seven days a week. Diners Club Cash Advance and Bank ATM fees apply.

Weekly Cash Advance Limit Requested: \$ _____ **Monthly Cash Advance Limit Requested: \$** _____

By checking this box, I request to be enrolled in the Cash Advance program. I understand that I may only enroll in the Cash Advance program with the approval of the Vice President for Administration and Finance. A PIN number will be selected at time of card activation.

Employee/Applicant Signature (Cash Advance Access only):

X _____ Date: _____

Vice President for Administration and Finance Approval Signature for Cash Advance access:

X _____ Date: _____

TRAVEL CARD TERMS AND CONDITIONS - EMPLOYEE/APPLICANT'S SIGNATURE

I, _____, hereby request a Frostburg State University Diners Club Travel Card (Travel Card). As a condition of receiving and using the Travel Card, I agree to comply with the following terms and conditions:

- I understand that I am being delegated the authority to purchase travel and hosting services on behalf of Frostburg State University using the Travel Card. I understand and agree that the Travel Card may be used to purchase the following services: transportation, lodging, vehicle rental, meals, and other authorized expenses related to pre-approved travel or hosting activities. The Travel Card may not be used for retail or any other purposes, whether personal or University-related.
- I agree that all travel and hosting services purchased with the Travel Card will be made in accordance with all applicable laws and regulations including, but not limited to, sponsored project terms and conditions; Maryland statutes; the Code of Maryland Regulations (COMAR); Diners Club Travel Card Program Policies and Procedures; State of Maryland Credit Card Policies,

University System of Maryland Travel Policies; Frostburg State University Travel Policies and Procedures; University System of Maryland Delegated Procurement Authority Policy; and departmental travel procedures. Cards must be used at least once every six months to remain active. I understand that the failure to follow established procedures may result in disciplinary action(s) against me including loss of leave time, suspension and/or termination of employment, fines, garnished wages, and/or criminal prosecution. The University's sales tax exemption must be used for all purchases made within the State of Maryland.

3. I agree to return the Travel Card immediately upon the request of Accounts Payable or my VP, dean, department head, or designee; upon suspension and/or separation from the University; or upon reassignment to another University unit. I acknowledge and agree that any failure to return the Travel Card pursuant to the requirements of this paragraph shall be cause for the imposition of disciplinary action(s) referred to in item 2 above.

4. I agree to notify Diners Club and Accounts Payable immediately upon discovering that the Travel Card or Travel Card number has been compromised, lost, or stolen or upon noticing any unauthorized transactions on my Travel Card. I agree that I, and not the University, am solely liable for any unauthorized charges made to the Travel Card unless the Travel Card or Travel Card number has been reported to Diners Club and Travel Services as comprised, lost, or stolen.

5. I understand and agree that charges using the Travel Card constitute a cash advance to me from the University for the limited purpose of funding authorized travel and/or hosting expenses. In the event I fail to reimburse the University for any unused or unauthorized and/or unsubstantiated charges within thirty (30) days of the conclusion of the related travel and/or hosting activity, I understand and agree that the University will bill me to recover any unpaid amount due plus the University's late fee and/or interest. I understand that once billed any unpaid amounts will be subject to the University's normal collection process including submission to the State Collection Unit and the charging of related collection fees. In the event I am separated from the University prior to completion of any payroll deductions, I hereby acknowledge my obligation to the University for any remaining amount due. I understand and agree that failure to reimburse the University within the thirty (30) day period shall result in immediate cancellation of my Travel Card.

6. I agree to provide the University with approved* expense forms with itemized receipts for all travel and/or hosting expenses charged to my Travel Card through the Workday expense system within ten (10) days of the charge. Failure to provide approved expense forms and itemized receipts will result in card suspension under the following guidelines:

- First Offense – email will be sent notifying cardholder that their card will be shut off in seven (7) calendar days until all outstanding transactions are fully approved.
- Second Offense - card will be suspended for 30 days**.
- Third Offense – card will be suspended for 60 days**.
- Any further offense will result in termination of all Travel Card privileges.

**Approved on-line in Workday by all parties and electronically signed through Adobe sign by both the cardholder (or employee who the charge was made on behalf of if not the cardholder) and their supervisor.*

***Cardholder's supervisor will be required to approve reinstatement after any suspension of 30 days or more.*

Employee/Applicant Signature and Title:

X _____ Title: _____ Date: _____

DIVISIONAL APPROVALS

Department Manager Approval:

Printed Name _____ Title: _____

Signature X _____ Date: _____

Executive Approval (Divisional VP, Athletic Director, or President):

Printed Name _____ Title: _____

Signature X _____ Date: _____

ADMINISTRATION AND FINANCE APPROVALS (TWO SIGNATURES REQUIRED)

Signature X _____ Assistant Comptroller Date: _____

Signature X _____ Comptroller Date: _____

Signature X _____ AVP Finance and Budget Date: _____