

# Travel Card (T-Card)

## Authorization Agreement and Application Information

### Issuance of Travel Card (T-Card)

The Department Head determines which employees in the department may have a T-Card.

- An employee may have only one T-Card.
- The employee must complete the [Web-based T-Card Training/Certification Quiz.\\*](#)
- The Department Card Manager (DCM) must generate an electronic application in the T-Card Solution Software (TCS)\*
- The applicant must be an employee or graduate student who travels on University business, purchases business meals or refreshments and/or is responsible for arranging travel for the department(s).
- The T-Card may be used only for qualified University business travel expenses, business meal purchases and/or refreshments for specific University events.
- A T-Card may be used only by the person to whom it is issued. It may not be loaned to others, including employees in the same department.
- The employee must have access to the Travel and Expense Management (TEM) system to create the required Expense Report (ER) for transactions within 60 days, or assign a Proxy to complete this task.

The Department Head determines the appropriate limits for each Cardholder based on a review of actual purchasing needs and responsibilities. Departments are encouraged to request reasonable limits to meet operational needs.

### Exception Requests:

Requests for exceptions to T-Card policies, including exceptions to the maximum limits (maximum \$4,999 per transaction and maximum \$25,000 per monthly cycle), must be submitted via a properly executed [T-Card Exception Request form](#) to UPAY Card Services for review. Information submitted on the form must include the rationale and University business purpose for the exception. UPAY Card Services will route the request through the appropriate channels for review. **All exceptions must be approved prior to purchase.** For more information on this procedure access the [Card Services website](#).

### The T-Card Authorization/Agreement and Application Information Form can be completed in two ways:

1. The Department Card Manager (DCM) obtains the applicant's date of birth, home address, country of citizenship, and mother's maiden name or password and enters information in T-Card Solution (TCS), prints form using TCS, and obtains applicant's and Department Head's signatures. The DCM e-mails the completed form to UPAY Card Services and retains the original document.  
**OR**
2. The Applicant and the DCM enter information on this online form. The form is printed and signed by applicant and Department Head. The DCM e-mails the completed form to UPAY Card Services. The DCM enters application information in TCS and retains the original document.

**\*Completion of these items along with the submission of this T-Card Authorization/Agreement and Application form is required to obtain a T-Card.**

# T-Card Authorization/Agreement

## Applicant Information

Name: \_\_\_\_\_

Department Name: \_\_\_\_\_ Department Phone: \_\_\_\_\_

University E-Mail Address: \_\_\_\_\_ Department Chart/Org: \_\_\_\_\_

The T-Card is intended for purchasing University-related business travel expenses and/or business meals or refreshments for specific University events. Purchases must also be consistent with policies pertaining to the C-FOAPAL charged and are not to include prohibited or restricted items unless criteria is met as designated in OBFS Business and Financial Policies and Procedures (BFPP), section 15. There must be funds available in the C-FOAPAL charged to pay for the purchases made with the T-Card.

**The T-Card is to be used only by the named Cardholder.** The Cardholder may not make personal purchases and then reimburse the University. The named Cardholder is solely responsible for the protection and proper use of the T-Card. A Cardholder who misuses or fraudulently uses the T-Card will be subject to investigation, disciplinary actions, and/or termination of employment by the University and may be subject to criminal prosecution. The University is authorized to deduct from the Cardholder's salary any personal charges made with the T-Card.

The Cardholder is required to complete T-Card on-line training and pass a certification quiz before a T-Card will be issued. Completing the T-Card training and quiz during the designated recertification period is required to retain the use of the T-Card.

The Cardholder agrees to create and submit an Expense Report (ER) upon review of the downloaded transactions in the Travel and Expense Management System (TEM), in a timely fashion (generally within 60 days of the original charge), and to report any discrepancies to the vendor and/or contact the Bank, as prescribed on the OBFS website.

If a T-Card is lost, the Cardholder is responsible for notifying the issuing bank and UPAY Card Services. If a card is stolen, the Cardholder is responsible for notifying the University Police Department in addition to the Bank and UPAY Card Services

**Non-adherence to any of the above procedures and or any of those described in the OBFS Business and Financial Policies and Procedures manual, sections 8,15,16.1.1 and 16.4.1 may result in revocation of individual Cardholder privileges.**

In order to meet the various requirements, the issuing Bank will perform a screening of each new card applicant. To facilitate this process, OBFS must provide personally identifying information (PII) about you and share it with the Bank and its affiliates. The sharing of your PII will ONLY be used by OBFS Card Services, the issuing Bank and its affiliates for card issuance. Additionally, PII about you will be physically and logically stored and protected while in the possession of OBFS Card Services, the Bank and its affiliates. Although, several administrative, physical and logical safeguards have been employed to protect systems on which your PII is stored, there is no guarantee of 100% security. Further, once the card is issued, your PII may be stored for an amount of time as deemed necessary by OBFS Card Services, the issuing Bank or its affiliates for business purposes and will not be used for other purposes than card issuance.

\_\_\_\_\_  
(initial) **I have read the above Privacy Notice regarding the collection, sharing, protection and storage of my personal information and agree to the terms provided. I understand that failure to agree to these terms will result in the non-issuance of the University card.**

For the full privacy notice and other information related to the collection, sharing, protection and storage of your personally identifying information related to this form, including your rights to the information collected about you, please contact OVPR Security Management Office at [\(217\) 265-5440](tel:2172655440).

## Signatures

*By signing this agreement and initialing the above statement, I accept the responsibility for the protection of the T-Card as described in this agreement, and I agree to abide by the terms and conditions contained herein. I understand that any violations of this policy may result in disciplinary actions as authorized by the University in accordance with the applicable policies, procedures, and code of conduct and may result in legal action pursuant to appropriate criminal and/or civil laws.*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

### Approved By:

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**The original completed form must be retained by the Department Card Manager (DCM). A copy of the completed form must be e-mailed to UPAY Card Services at [cco@uillinois.edu](mailto:cco@uillinois.edu).**

# T-Card Application Information

## Applicant Personal Information

Applicant Name: \_\_\_\_\_ UIN: \_\_\_\_\_  
Name as it should appear on card (21 character limit) \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Mother's Maiden Name/Password: \_\_\_\_\_

## Home Address

Street Address: \_\_\_\_\_ Street Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_

## T-Card Information (to be filled out by Department Card Manager)

Department Card Manager Name: \_\_\_\_\_ UIN: \_\_\_\_\_  
Department Head Name: \_\_\_\_\_ UIN: \_\_\_\_\_

## Cardholder's Spend Limit

Single Transaction \$ \_\_\_\_\_  
Cycle/Monthly Transactions \$ \_\_\_\_\_

## Department Chart/Org

Chart \_\_\_\_\_ Org \_\_\_\_\_

## Ship to - University USPS Address (Cardholder's Billing Address)

Room #: \_\_\_\_\_ Building Name: \_\_\_\_\_ Mail Code: \_\_\_\_\_  
Office Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

## Signatures

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

### Approved By:

Department Head Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

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