



US BANK VISA CORPORATE CARD: EMPLOYEE CARD APPLICATION

CARD TYPE

MONTHLY CREDIT LIMIT

CASH ADVANCE %

All fields, except "Role-Based Email," are required. If employee has no legal middle name, mark the field "N/A".

EMPLOYEE INFORMATION

LEGAL FIRST NAME

LEGAL MIDDLE NAME

LEGAL LAST NAME

<p>EMBOSSING (Name to appear on plastic)</p> <p>FIRST AND LAST NAME</p> <p>(Full name cannot exceed 23 characters, including spaces)</p> <p>LAKEHEAD UNIVERSITY</p>
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DATE OF BIRTH (MM/DD/YYYY)

LAKEHEAD ID NUMBER

BUSINESS ADDRESS (choose campus from dropdown)

DEPARTMENT

EMAIL ADDRESS (associated with employee ID)

ROLE-BASED EMAIL (if applicable; for primary contact)

BUSINESS PHONE NUMBER (last four digits will be used for activation)

EXTENSION

DEFAULT BUDGET CODE FOR CONCUR SETUP (location_fund_cost centre_object code)

APPROVALS

Employee's Signature

Date

Supervisor's Signature

Date

Note: supervisor must also have signing authority on default budget code listed.

Site Coordinator's Signature

Date

To Be Signed by Financial Services

Send completed form to creditcard@lakeheadu.ca for Site Coordinator approval and processing.