

# Travel Card Request Form

Hamilton College  
Travel Card Request Form

PLEASE RETURN TO THE BUSINESS OFFICE

\_\_\_\_\_ OR \_\_\_\_\_  
Name Department

(Card may be issued in name of employee or department)

Work Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Hamilton ID#: \_\_\_\_\_  
(as shown on Hamilton ID card)

Email Address: \_\_\_\_\_

Employee Who Will Be Authorizing Transactions On-line: \_\_\_\_\_

Cost Center (first 9 digits of account #) expenses will be charged to:

All information needs to be filled out to prevent a delay in processing the card.

***I request a Corporate Card for Traveling issued under Hamilton College's agreement with Key Bank. I have read Hamilton College's Travel Card Policy and agree to comply with the terms and conditions as set out therein. I understand that the card will be revoked if I fail to comply.***

Cardholder Name (printed): \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Vice President Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Internal Use Only**

Date ordered \_\_\_\_\_ Last 4 of Card # \_\_\_\_\_ Credit limit \_\_\_\_\_ Proxy \_\_\_\_\_

Workflow \_\_\_\_\_ Approver \_\_\_\_\_ Notifications \_\_\_\_\_

Received \_\_\_\_\_ Date \_\_\_\_\_