

Travel Card Request Form

Hamilton College
Travel Card Request Form

PLEASE RETURN TO THE BUSINESS OFFICE

Name (*Card to be issued in name of an employee*)

Work Phone #: _____

Cell Phone #: _____

Date of Birth: _____

Hamilton ID#: _____

(as shown on Hamilton ID card)

Hamilton Email Address: _____

Supervisor – The Final Approver of the T&E Expense Report:

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 Travel 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:** _____

VP or Dean or Chair Signature: _____ **Date:** _____

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