*Florida Institute of Technology*

**PROCUREMENT CARD APPLICATION**

**Appendix A**

***Please provide the following information:***

Check type of card ❑ Individual Card ❑ Department Card Date_____

Index No._____ Organization _____

Program_____ Fund _____

APPLICANT_____ Department _____

Building No._____ E-mail _____ Phone Number _____

CARD COORDINATOR_____ Banner Username_____

E-mail _____ Phone Number _____

Default GL Account Number 72202

***The following signatures are required to process your application:***

APPLICANT Signature _____ Print Name_____

DEPARTMENT HEAD Signature _____ Print Name_____

VPFA/PROVOST Signature _____

**Send Completed Applications to the Office of Purchasing**
**Attn: Procurement Card Administrator**