

## University of Arkansas Travel Card Agreement for Employee

**Congratulations!** You have been granted the privilege of having a University of Arkansas Travel Card (TCard). Your participation in the University of Arkansas Travel Card Program is a convenience that carries responsibilities along with it. Although this card is issued in your name, it **IS University property** and must be used with good judgment. **By signing this Agreement, you acknowledge that you understand and will comply with all University of Arkansas Travel Card guidelines, as listed below.**

I, as an authorized and approved cardholder, have been trained, fully understand, and agree to the following terms and conditions regarding the use and safekeeping of the travel card (TCard) entrusted to me:

1. I accept full personal responsibility for the safekeeping of the TCard assigned to me.
2. I agree that I will not provide my full credit card number on any document that is transmitted electronically.
3. I will immediately report the theft or loss of my TCard to Bank of America by phone at 1-888-449-2273 AND the University of Arkansas Travel Card Administrator at 479-575-5867.
4. I understand that if I am an **Administrative** TCard holder, the Cardholder Delegation Form should be used when I have allowed another person to utilize my card.
5. If I have a **Traveler** TCard, all charges are ONLY associated directly to the cardholder.
6. I will be making financial commitments on behalf of the University of Arkansas and will obtain fair and reasonable prices following University of Arkansas Travel Policy and State of Arkansas Travel Regulations.
7. If I use my **Traveler** TCard for lodging, meals, car rental, or other travel related expenses, I understand that I am responsible for repayment of any remaining balance due, immediately upon my Expense Report being processed by the Travel Office.
8. I understand that all credit card transactions are to be reconciled in Workday by the last working day of the month in which the credit card billing cycle ends.
9. If I fail to repay any non-allowable expense or fail to reconcile TCard transactions within 120 calendar days, the University is authorized to withhold the full amount from any payment(s) due me from the University, including payroll checks, as repayment.
10. I will not use the TCard for non-University of Arkansas related travel expenses, unauthorized purchases, or for personal purchases.
11. I understand the use of the TCard does not exempt me from travel requirements as set forth in University of Arkansas policy and procedures, State of Arkansas Travel Regulations and the TCard guidelines.
12. I understand I cannot use the TCard as a financial reference to obtain personal credit cards or loans.
13. I understand I am personally responsible for obtaining ALL original detailed receipts and submitting them in accordance with University of Arkansas TCard procedures when required.
14. I understand any purchases made by me may be recorded and reviewed in management reports, to ensure compliance with University of Arkansas Travel policies and TCard guidelines.
15. I understand failure to follow any of the above listed terms & conditions and/or if found to have misused the TCard in any manner may result in:
  - Revocation of the privilege to use the TCard.
  - Disciplinary action.
  - Termination of employment, and/or criminal charges being filed with the appropriate authority.
16. I agree to surrender the TCard immediately upon request or upon termination of employment for any reason.
17. I will be traveling more than three times OR incur expenses more than \$2000 per fiscal year.

I, \_\_\_\_\_ hereby accept the above terms and conditions and acknowledge receipt of the TCard.  
(please print)

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Workday Employee ID

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