SUNY POLYTECHNIC INSTITUTE TRAVEL CREDIT CARD APPLICATION/ACKNOWLEDGEMENT FORM

Your use of the NYS Citibank Travel Card is subject to the following terms and conditions:

1. You are being entrusted with a valuable tool – a NYS Citibank Travel Card – which is to be used for business travel expenses. Because you will be making a financial commitment on behalf of the State, you must strive to obtain best value for the state by following established travel policies.

2. All charges made to your credit card will be posted to a central bill by Citibank and sent to the Business Office for payment. You will not receive a bill from Citibank (although you may view your monthly statement of charges online). You must submit your travel voucher promptly in order for all charges to be reconciled. Failure to submit your voucher in a timely manner may result in revocation of your travel card.

3. You may use the travel card to pay for travel expenses when you are on official State business. You may not use it for personal charges. The Business Office and the Office of the State Comptroller will audit the use of your card and take appropriate action on any discrepancies or unauthorized charges. Any evidence that your card has been used fraudulently will require an investigation, after which disciplinary action may result. Fraudulent use may also result in criminal prosecution.

4. You must follow the policies and procedures established by SUNY Polytechnic and New York State for the use of this credit card. Failure to do so may result in revocation of your user privileges or other disciplinary action, which could include termination of employment.

5. NYS Citibank Travel Cards are the property of New York State. You must return your card immediately upon request or upon termination of employment or retirement. Should there be any change in your employment status you must return this card and arrange to have a new card issued, if necessary.

6. If this credit card is lost or stolen, you must notify the Business Office or Citibank immediately.

7. You must comply with any changes to the terms and conditions or policies and procedures concerning use of this card.

As the employee I have read and understand the terms and conditions stated above and am requesting receipt of a Travel Card.

Employee Name __________________________ Phone # ________________

Business Address _______________________________________________

Signature ______________________________________ Date _____________

Signature of Supervisor ________________________ Date ______________