

UNIVERSITY CORPORATE CREDIT CARD

APPLICATION FORM AND CONDITIONS OF USE

Family name:..... Given name:.....
 Position:..... Employee No:.....
 School/Division:..... Email Address:.....
 Campus Location:..... Building:.....

I hereby apply for issue of a University Corporate Credit Card under the conditions set out in this application.

Cardholders:

I understand that the card will be issued to me subject to the following conditions:

1. I am aware of my responsibilities and duties as a Commonwealth Bank Business MasterCard holder under the University operating procedures.
2. I acknowledge that my use of the card must be:
 - For authorised business use only
 - Within the financial delegation given to me
 - Within card transaction and monthly credit limits as advised from time to time.
3. I am aware that transactions made with the card are subject to authorisation and audit.
4. I undertake to keep the card, PIN and card password (if any) safe from unauthorised use at all times.
5. I undertake to return the Card to the University Corporate Card Controller:
 - On request
 - Prior to assuming duties in another position that does not require the use of the Card
 - Leaving the service of the University.
6. I undertake to advise Commonwealth Bank Customer Service Card Services by telephone on 132221 immediately I am aware that the card has been lost or stolen or that it has been misused. I will also advise the University Corporate Card Controller.
7. Misuse of the University Corporate Card may result in withdrawal of card and/or disciplinary action being initiated against me.
8. Any fraudulent misuse of the University Corporate Card may result in legal proceedings being initiated against me which could render me liable to a fine, imprisonment or both.
9. I will retain all quotes, sales vouchers, receipts, tax invoices and other supporting documentation.
10. I will comply with card accounting procedures in force from time to time.
11. My default accounting details are: **Centre:** **Project:**..... **Campus:**.....

Applicant

I acknowledge that I have read and understand the above conditions and policy governing the issue and use of the University Corporate Card and accept these conditions. I agree to abide by the University's Code of Conduct policy as may be applicable to the use of this card.

Applicants Signature:..... **Date:**...../...../.....

Supervisor/Manager

The issue of a University Corporate Card in accordance with the above conditions is supported. I recommend that the Applicant be restricted to the following limit:

Monthly Credit Limit: \$.....

Supervisor/ Manager Signature:..... Date:...../..... /.....

Please Print Name:.....

PVC/ Dean/Director (CAT6 and above)

I hereby recommend a Corporate Credit card to be issued to the applicant

Signature:..... Date:...../...../.....

Please Print Name:.....

CBA Corporate Card Application Instructions

Once this form is approved, please apply to the CBA for your corporate credit card via the CBA's Credit Card Manager portal. To find, go to the Finance Office Website - Finance Forms - Online CBA Corporate Credit Card Application. https://www.westernsydney.edu.au/finance_office/finance/finance_forms

Please complete all fields within the portal and scan and upload this approval form to the portal where directed.

For identification purposes, if you are an existing CBA customer please enter your CBA account details. Otherwise, the bank requires you to be identified via the 100-point identification check. The acceptable identification for this purpose is as follows:

Drivers Licence.....
(40 Points)

Passport:
(70 Points)

Credit Card.....
(25 Points)

Debit Card.....
(25 Points)

Medicare Card.....
(25 Points)

Birth Certificate.....
(70 Points)

Please scan and upload your identification documents to the portal where directed.