



Purchasing Card Application Form

PURCHASING CARDS ARE FOR PERMANENT EMPLOYEES ONLY (not Emergency or Temporary)

All signatures must be obtained prior to submitting this form to the Purchasing Department at purchasing@nmt.edu. Please send questions to the same email address.

Cardholder Legal Name _____
(To be embossed on card)

Cardholder Email Address _____

Cardholder Office Telephone # _____

Department Name _____

Default Index and Account Code _____ / _____

Campus Mailing Address Bldg.: _____ Room# _____

Cardholder Signature _____ Date _____

Approver Name _____

Approver Signature _____ Date _____

Director/Department Head Name _____

Director/Department Head Signature _____ Date _____

President/Division Vice President Name _____

President/Division Vice President Signature _____ Date _____

Note: Preset Card Limits are \$1,000 per transaction and \$5,000 per monthly limit