

University of Arkansas Travel Card Agreement for Employee

Congratulations! You have been granted the privilege of having a UAMS Travel Card (TCard). Your participation in the UAMS Travel Card Program is a convenience that carries responsibilities along with it. Although this card is issued in your name, it **IS UAMS property** and must be used with good judgment. **By signing this Agreement, you acknowledge that you understand and will comply with all UAMS 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 understand if I am an **Administrative** TCard holder, the Cardholder Delegation Form should be used when I have allowed another person to utilize my card.
3. If I have a **Traveler** TCard, all charges are ONLY associated directly to the cardholder.
4. I will be making financial commitments on behalf of UAMS and will obtain fair and reasonable prices following UAMS Travel Policy and State of Arkansas Travel Regulations.
5. My "trip" in SAP is to be processed within **15 working days** after the return of the trip for individual domestic travel. Individual international trips are to be processed within 30 calendar days after return from the trip.
6. 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 trip

being processed by the Travel Office.

7. If I fail to repay any reimbursable amount, not allowable, the University is authorized to withhold the full amount from any payment(s) due me from the University, including payroll checks, as repayment.
8. I will not use the TCard for non-UAMS related travel expenses, unauthorized purchases, or for personal purchases.
9. I will immediately report the theft or loss of my TCard to Bank of America by phone at 1.888.449.52273 AND the UAMS Travel Card Administrator at 501.686.6822.
10. I understand the use of the TCard does not exempt me from travel requirements as set forth in UAMS policy and procedures, State of Arkansas Travel Regulations and the TCard guidelines.
11. I understand I cannot use the TCard as a financial reference to obtain personal credit cards or loans.
12. I understand I am personally responsible for obtaining **ALL** original detailed receipts and submitting them in accordance with UAMS TCard procedures when required.
13. I understand any purchases made by me may be recorded and reviewed in management reports, to ensure compliance with UAMS Travel policies and TCard guidelines.
14. 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.
15. I agree to surrender the TCard immediately upon request or upon termination of employment for any reason.

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

Employee Signature

Date

SAP Employee ID

Email Address