



**Form 3215 FR.06**  
**Purchasing Card Request Form**

Revised 9/11/2019

**Instructions:**

- Complete all fields of this form to request a department or individual University Purchasing Card ("PCard").
- In the "Action" section, select **Add**, **Cancel**, or **Change** from the drop-down menu provided.
- After completion, please submit to your **Lead Administrator or Operations Manager**.

\* This form is for PCard requests only \*

Required Cardholder Information					
Action:		First Name:		Last Name:	
UPI #:		Country of Citizenship:		Social Security # (last 4 digits only):	
Date of Birth:		Email:		Office Phone #:	
Passcode (cannot include the word "Yale"):		Cell Phone #:			
Home Address:					
Organization:		Cost Center Requesting Card:			

Required PCard Information	
Last 4 Digits of Card Number (Required for Changes and Cancellations):	
Business Office Street Address (Include P.O. Box, City, State, Zip) (Required for New PCards and Changes to Address):	
Name on Card (Required for Department Card only):	

PCard Type and Limits	
<input type="checkbox"/> Department Card (only \$500 per transaction, \$5K per month, department name on card); or <input type="checkbox"/> Individual Card (required to fill out limits below)	
Air/Rail and all T&E	(select one of the values below for each row)
Max Amt. per transaction:	\$5K (max)
Max Amt. per month:	\$25K (max)
Supplies / other retail items	
Max Amt. per transaction:	\$2K (max)
Max Amt. per month:	\$10K (max)

Requestor Information	
Request Date:	
Requestor (person completing this form):	
Request Approver (Lead Administrator or Operations Manager):	

**Lead Administrators and Operations Managers** – Please email completed form to [purchasing.card@yale.edu](mailto:purchasing.card@yale.edu).

Please call 203-432-3227 with any questions.