



UD Credit Card Services – New Card

Procurement Services

UD Credit Card Services

Use this form for all requests related to the UD Credit Card. This form can be initiated for yourself or for another UD employee. Updates to existing cards for multiple employees can be done using one form. The types of requests that can be made using this form are:

1. Access to Works (the employee is NOT required to have a UD credit card to get access to Works)
2. Request a New Card
3. Replenish a declining balance card
4. Update existing card
5. Cancel Card



If you have questions, contact Procurement at (302) 831-2159 or by email, creditcard@udel.edu.

Symbol key: * Required information, ! Error

Form originator

Originated by: Narayan, Abirami Meyyappan (701814301)

Department: Procurement Services (4750)

Department address: 104 General Services Building

Department phone: * (use format nnn-xxx-xxxx)

Request type

Requested for: * Myself
 Another employee
 Multiple employees (only for requesting updates to existing cards)

Type of request: *

- Choose one
- Access to Works™
- New card
- Replenish declining balance card
- Update existing card(s)
- Cancel card

Next step ▶



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Steps to Request a New Credit Card:

Step 1: UD Web forms log in → Blanks → UD Credit Card Services

HELP BLANKS IN BASKET OUT BASKET ARCHIVE FOLDERS DRAFTS LOG OUT

Scroll down the list to find

- UD Credit Card Services
- Wellness Activity Log: Individual
- Wellness Activity Log: Team Captain
- Winter Session Housing Registration

Step 2: The top section on the first page comes with the Originator's information already filled in.

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Step 3: Select Requested for - Myself or Another Employee. Multiple Employees choice is available only for Updating Existing Card(s). For Another Employee choice – type in the last name of the employee in the text box and pick from the available list.

Step 4: For Type of Request Select – New Card. Click Next Step.



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Step 5: Choose an answer from the drop down for the question, “Does employee currently have a UD credit card?”

Request type

Requested for: * Myself
 Another employee
 Multiple employees (only for requesting updates to existing cards)

Type of request: New card

Does employee currently have a UD credit card? * Choose one

Card type being requested: * Yes

Step 6: Choose card type being requested from the drop down. Click next step.

Type of request: New card

Does employee currently have a UD credit card? * Choose one

Card type being requested: * Choose one
Procurement functionality
Travel functionality
Both procurement and travel functionality
Declining balance card only

Next step



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Step 7:

For Card type – Procurement functionality

Fill in

1. Credit limit – cannot exceed \$20,000
2. Single purchase limit – cannot exceed \$5,000 and has to be lower than the credit limit
3. Procurement card administrator and Independent reviewer are required and cannot be the same person. Start typing in the Last name of the employee or use the magnifying glass to make the selection.
4. Procurement card administrator phone number is required
5. Reason for cash and/or card is needed is required

Card information

Card type being requested: Procurement functionality

Credit limit: * Not to exceed \$20,000.00
\$ (use format nn.nn)

Single purchase limit: * Not to exceed \$5,000.00
\$ (use format nn.nn)

Procurement card administrator: *

Procurement card administrator campus phone: * (use format nnn-xxx-xxxx)

Independent reviewer: *

Alternate approver: *

Reason for which cash and/or card is needed: *



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For Card type – Travel functionality

Fill in

1. Credit limit – cannot exceed \$20,000
2. Single purchase limit – cannot exceed \$5,000 and has to be lower than the credit limit
3. Travel card administrator and Independent reviewer are required and cannot be the same person. Start typing in the Last name of the employee or use the magnifying glass to make the selection.
4. Travel card administrator phone number is required
5. Reason for cash and/or card is needed is required

Card information

Card type being requested: Travel functionality

Credit limit: * Not to exceed \$20,000.00
\$ (use format nn.nn)

Single purchase limit: * Not to exceed \$5,000.00
\$ (use format nn.nn)

Travel card administrator: *

Travel card administrator campus phone: * (use format nnn-xxx-xxxx)

Independent reviewer: *

Alternate approver: *

Reason for which cash and/or card is needed: *



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For Card type – Both procurement and travel functionality

Fill in

1. Credit limit – cannot exceed \$20,000
2. Single purchase limit – cannot exceed \$5,000 and has to be lower than the credit limit
3. Procurement card administrator and Independent reviewer are required and cannot be the same person. Start typing in the Last name of the employee or use the magnifying glass to make the selection.
4. Procurement card administrator phone number is required
5. Travel card administrator is not required. If a travel card administrator is not specified, the Procurement card administrator will act as the travel administrator also.
6. Reason for cash and/or card is needed is required

Card information

Card type being requested: Both procurement and travel functionality

Credit limit: * Not to exceed \$20,000.00
\$ (use format nn.nn)

Single purchase limit: * Not to exceed \$5,000.00
\$ (use format nn.nn)

Procurement card administrator: *

Procurement card administrator campus phone: * (use format nnn-xxx-xxxx)

Travel card administrator:

Travel card administrator campus phone: (use format nnn-xxx-xxxx)

Independent reviewer: *

Alternate approver:

Reason for which cash and/or card is needed: *



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For Card type – Declining balance card only

First fill in the card information and then fill in the declining balance card information

1. Credit limit – cannot exceed \$20,000
2. Single purchase limit – cannot exceed \$5,000 and has to be lower than the credit limit
3. Declining balance card administrator and Independent reviewer are required and cannot be the same person. Start typing in the Last name of the employee or use the magnifying glass to make the selection.
4. Declining balance card administrator phone number is required
5. Reason for cash and/or card is needed is required

Card information

Card type being requested: Declining balance card only

Credit limit: * Not to exceed \$20,000.00
\$ (use format nn.nn)

Single purchase limit: * Not to exceed \$5,000.00
\$ (use format nn.nn)

Declining balance card administrator: *

Declining balance card administrator campus phone: * (use format nnn-xxx-xxxx)

Independent reviewer: *

Alternate approver:

Reason for which cash and/or card is needed: *



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For Declining balance card information – fill in

1. Choose an answer from the drop down for “Have you requested a declining balance card in the past?”
2. The Date funds are required
3. The Fund expiration date
4. The Total dollar amount should reflect the amount needed plus any remaining balance on the card.
5. The Percentage of total amount to be withdrawn as cash

Declining balance card information

Have you requested a declining balance card in the past?:

Date funds are required: * Allow at least 4 working days for delivery.
 (use format mm/dd/yyyy)

Fund expiration date: * I.e., the date beyond which the card will no longer be valid.
 (use format mm/dd/yyyy)

Total dollar amount needed, including any remaining balance on the card: * (use format nn.nn)

Percentage of total amount to be withdrawn as cash: * Note: Cash withdrawals require a PIN that will be provided to you and will incur a 2% fee that will be automatically deducted from the total amount of the withdrawal. International charges incur an additional 1% fee.
 %



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Step 8: Funding

If you are going to provide the funding information

1. Select the choice that says “I will provide a SpeedType”
2. Then provide the SpeedType and Account. Click Next Step

Funding

Account information: * I will provide a SpeedType.
 I will designate a funding originator.

SpeedType:

Account:

[Previous step](#) [Save & exit](#) [Exit without saving](#) [Next step](#)

If you are NOT providing the funding information

1. Select the choice that says “I will designate a funding originator”
2. Start typing in the Last name of the employee or use the magnifying glass to make the selection.
3. Click Next Step

Funding

Account information: I will provide a SpeedType.
 I will designate a funding originator.

[Previous step](#) [Save & exit](#) [Exit without saving](#) [Next step](#)



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Step 9: If you are requesting the card for yourself. The card terms and conditions will be displayed. Choose "I agree" from the drop down. Enter your First name and Last name in the respective text boxes.

If you are requesting the card for another employee, that employee will receive the form to accept the terms and conditions, when you click on finish and submit.

UD Credit Card Cardholder Agreement

I, Abirami Narayan, as the "Cardholder", agree to the following conditions regarding my use of the University of Delaware Procurement Card, Travel Card, and/or Declining Balance Card all of which hereafter referred to as the "UD Credit Card".

1. I understand that by using the UD Credit Card, I will be making financial commitments on behalf of the University of Delaware and that the University will be liable for all charges made with the UD Credit Card.
2. I will strive to obtain the best value for the University when purchasing merchandise and/or services with the UD Credit Card.
3. I agree to use the UD Credit Card only for authorized purchases and in an appropriate manner per the requirements set forth in the UD Credit Card Program Policies and Procedures ([Policy 5-22](#)), the University Travel Policy ([Policy 3-7](#)) and the Quick Guide for Travelers/Cardholders as they each apply to my use of the UD Credit Card.
4. I understand that should I make an unauthorized purchase or withdrawal with the UD Credit Card or use the UD Credit Card in an inappropriate manner, I will be subject to disciplinary action including the possibility of card cancellation, termination of employment at the University of Delaware, and criminal prosecution. I further agree that should I make an unauthorized purchase or withdrawal with the UD Credit Card, I will reimburse the University in full. Should payment not be made within fifteen (15) days of the date on which I was notified of my obligation to reimburse the University, I hereby authorize the University of Delaware to deduct from my pay the exact amount of my debt. Should my employment at the University of Delaware terminate prior to my reimbursing the University in full, I hereby authorize the University of Delaware to deduct from my final paycheck the exact amount of my debt.
5. I understand that collection agency fees, attorney fees, court costs and other costs and charges necessary for the collection of any amount not paid by me when due are my obligation.
6. I understand that the University will monitor and audit my use of the UD Credit Card.
7. I agree to return the UD Credit Card to an authorized University representative (as defined in the UD Credit Card Program Policies and Procedures) immediately upon request of the UD Credit Card Program Administrator or upon my transfer to a different department or upon termination of my employment at the University of Delaware.
8. I have completed the UD Credit Card training and will follow the procedures set forth in that training.
9. I have watched the required tutorials and familiarized myself with the University's travel policies.
10. In obtaining a University of Delaware issued credit card and/or gaining access to Works, the reconciliation tool for expenditures, the cardholder/user agrees to abide by all University of Delaware policies and procedures related to financial activity.

By selecting "I agree" and entering my name below, I am indicating that I have read this agreement, understand it, and agree to be bound by it and by any subsequent amendments for as long as I am a Cardholder at the University of Delaware.

*

First name: * Abirami

Last name: * Narayan



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Step 10: Choose a Purpose Code Administrator from the drop down to approve the request. Additional Approvers are optional, not required. Click Finish and Submit.

Routing

Role	Email address	Date
Form Originator	Narayan,Abirami Meyyappan	
Approver ▾	<input type="text"/>	
Approver ▾	<input type="text"/>	
Approver ▾	<input type="text"/>	
Purpose Code Administrator *	Choose one ▾	
Final Approver	Credit Card	
Copy	Narayan,Abirami Meyyappan	
Copy	Roeder,Kathy L	

Step 11: After the approval of the Purpose Code Administrator, the form is routed to the Credit Card web form basket for final approval.

Step 12: The Card Holder and the Card Administrator are automatically copied upon Final Approval of the form.