

**BOSTON COLLEGE
Office of Auxiliary Services
Conference Plan Application**

This application must be received by Auxiliary Services (onecard@bc.edu) at least one month prior to the requested card activation date.

*Please note there is a cost of \$1.00 for **each card** that will be added to your total.

Department:

Name of Requestor (Department Administrator):

Requestor email:

Requestor phone:

Name of Program, Event, Conference, Group:

Will Conference Card(s) be assigned to a BC Employee(s)? Yes No

If YES, please name the employee(s):

Will Conference Card(s) be assigned to a BC student(s)? Yes No

Describe intended usage and provide business purpose (attach any supporting documentation concerning this program or process):

Card balance type:

Inclining balance

Declining balance

Define intended usage:

Core Dining

Specialty Dining

Concessions

Mini Marts

Vending

Off-Campus Food

Anticipated number of cards needed throughout the year:

Max value (per card):

Total expected annual value of all card(s):

Total charge to chartstring, including card fee:

Peoplesoft Chartstring: - - - - - - - **68160**
 Dept *Fund* *Fund Srce* *Prgm* *Func* *Property* *Acct*

Active period, if less than the remainder of the current fiscal year, (days, weeks, etc, or set to expire on specified date):

PROGRAM ACKNOWLEDGEMENTS (please check agree):

Requestor acknowledges use of Conference Card is in accordance with the intended usage and business purpose outlined above:

AGREE

Boston College complies with IRS regulations, and retention of receipts or appropriate documentation is the responsibility of the department or cardholder:

AGREE

Purpose and attendees must be documented and accounted for:

AGREE

Conference Card transactions are subject to Boston College Internal Audit scrutiny and that abuses can result in the forfeiture of funds and reductions in future budget allocations:

AGREE

Requestor acknowledges that this card is funded from operational budgets, and is intended for business use in the same year as the budget year from which the funds are processed:

AGREE

Requestor acknowledges that card balances are NOT being carried forward from one year to the next:

AGREE

Requestor acknowledges expenditures from this department card are for university business purposes:

AGREE

Requestor acknowledges the Conference Card should not be used for transactions which are covered under the University P-card program:

AGREE

The request must be approved by the person responsible for funding (VP, Director, Business Manager):

Approver Name:

Approver Title:

Approver Signature _____ **Date** _____
