

Northland Community and Technical College Procurement Card Application Form

Name: _____
Email: _____@northlandcollege.edu
Supervisor: _____
Date: _____
Campus: _____ (TRF or EGF)
Program: _____
Primary Cost Center #: _____
Requested limit per purchase \$ _____ & per month \$ _____

I understand this information will be shared with the issuing bank.

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

RETURN COMPLETED REQUEST TO:

East Grand Forks Business Office
Attn: Angie Menge