

BOSTON COLLEGE
Office of Auxiliary Services
Conference Plan Application
Revised 8/27/24

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):

Define intended usage:	Campus Dining	Concessions	Vending
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*Please note that these cards are only for Dining usage, we are unable to accommodate requests for laundry.

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: Dept - Fund - Fund Srce - Prqrm - Func - Property - **68160**
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** _____

AUXILIARY SERVICES USE

Reviewed by:

Auxiliary Services _____ Date _____

Controllers / Budget Office _____ Date _____

_____ Date _____

Office of Sponsored Programs _____ Date _____

Approved? ☐ YES ☐ NO

Plan Number: _____

Meals Tax Status: ☐ Exempt as business expense of the University
☐ Exempt as _____
☐ Taxable