

## **Bursar**

Budget unit Head Signature:

## Cash/Credit Card Handling and Acceptance: Security Ethics Certification

The following individual is hereby granted permission to accept and process cash and/or

credit card payments and the associated personal identifiable information in conjunction with performing duties for Temple University. Provide justification for this requestor to have access and process cash and/or credit card transactions: I have read the University's Credit Card Handling and Acceptance Policy (Policy Number 05.20.17) and Cash Handling Policy (Policy Number 05.20.12) and understand that personal and financial information is confidential. If I misuse or otherwise improperly disclose confidential information, I will be subject to disciplinary action, up to and including discharge of employment. TU ID number: Requestor Name: (Print) Requestor Signature: Date: Approval Signatures Supervisor Name: Department: (Print) Supervisor Signature: Date: Budget Unit Head Name: Department: (Print)

Date: