



Georgia Tech PCard Administrators require this form to be used for Cardholder's transferring departments within the Institute and their Pcard is still needed in their new role.

Cardholder First Name	Last Name
Cardholder Title	Employee ID
FORMER DEPARTMENT INF	O:
Department	Dept # Mail Code
GT Street Address, City, State, Zip	
Georgia Tech Phone Number	Email
NEW DEPARTMENT INFO:	
Department	Dept # Mail Code
GT Street Address, City, State, Zip	
Georgia Tech Phone Number	Email
Authorization Controls:	
Keep current profile:	YES NO *If no, please provide reason for profile change
Print Approver's Name	Title
(Dept Head, VP, or Dean)	
Approver's Signature	Date
Georgia Tech PCard Administrator Approval	Date