



University of Sioux Falls Long Distance Code/Travel Card Request Form

Check all that apply:

- Long Distance Calling Code (on campus)
- Long Distance Travel Card (off campus)

Employee Name: _____

Employee's CARS ID #: _____

Employee Department: _____

Budget Number: _____

Supervisor Signature: _____

Human Resources Signature: _____



Human Resources Section:

Date Request Received: _____ Date Request Sent to Risk Management: _____

Risk Management Section:

Long Distance Code: _____ Calling Card Number: _____

Email sent to Midco: _____ Document returned to HR: _____

DATA	Excel	LD	_____	CC	_____
	Access	LD	_____ _____	CC	_____ _____
	DEPT CODE		_____		