



Procurement Card Agreement Form



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I, , hereby acknowledge receipt of a Massachusetts Institute of Technology ("MIT") Procurement Card ("ProCard"). As the Cardholder, I agree to the following conditions regarding my use of MIT ProCard issued in my name:

1. I understand that by using the ProCard, I will be making financial commitments on behalf of MIT and that MIT will be liable for all purchases made with the ProCard.
2. I understand it is in MIT's best interests to obtain the best value for MIT when purchasing merchandise and/or services with the ProCard.
3. I understand that it is MIT's policy on affirmative action that small and disadvantaged business concerns shall have the maximum practicable opportunity to participate as MIT sources on acquisition for goods and services.
4. I agree to use the ProCard only for authorized purchases and in an appropriate manner, as defined in the [MIT ProCard User's Guide](#). I understand that MIT or MIT-approved agents may monitor and audit my ProCard use at any time.
5. I understand that if I should make an unauthorized purchase with the ProCard or use the ProCard in an inappropriate manner, I will be subject to disciplinary action including possible TERMINATION OF EMPLOYMENT or other appropriate disciplinary procedures at MIT.
6. If I should use this ProCard for unauthorized purchases of goods and services, I HEREBY AUTHORIZE MIT TO DEDUCT FROM MY SALARY, OR FROM ANY OTHER AMOUNTS PAYABLE TO ME BY MIT, AN AMOUNT EQUAL TO THE TOTAL OF THE UNAUTHORIZED PURCHASES. I also agree to repay MIT any amounts owed by me even if I am no longer employed by MIT.
7. I understand that the ProCard is and will remain the property of MIT. I agree to return the ProCard to the ProCard Administrator, as defined in the [MIT ProCard User's Guide](#), immediately upon request, upon transfer from one department to another, or upon termination of my employment at MIT.
8. I have read the [ProCard User's Guide](#) and will abide by all the requirements set forth in said Guide, and as it may be changed from time to time.

By my signature below, I acknowledge that I have read this Agreement, understand it and agree to be bound by it, and any changes hereto that I may sign, for as long as I am an MIT ProCard holder.

Cardholder Signature: Date:
Department:

Submit Form

Questions? Please contact procard@mit.edu.