

THE CITADEL

IDENTIFICATION / CHARGE ACCOUNT AUTHORIZATION FORM FOR NON-EMPLOYEES

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|--|---|
| <input type="checkbox"/> BOARD OF VISITORS | <input type="checkbox"/> CITADEL FOUNDATION |
| <input type="checkbox"/> NAME CHANGE | <input type="checkbox"/> POLICE CORPS |
| <input type="checkbox"/> NEW RETIREE | RETIREMENT DATE: _____ |
| <input type="checkbox"/> ROTC | BRANCH OF SERVICE: _____ |
| <input type="checkbox"/> OTHER: _____ | |

Employee Name: _____

SSN#: _____

E-Mail Address: _____

Home Address: _____

City, State, Zip Code: _____

Home Phone #: _____

Work Phone #: _____

EMPLOYEE IS AUTHORIZED FOR CHARGING PRIVILEGES. (MUST READ AND SIGN AGREEMENT BELOW.)

CHECK BOX, IF AUTHORIZING SPOUSE TO USE CHARGE CARD IN YOUR NAME. LEAVE BLANK, IF YOU DO NOT WANT SPOUSE TO CHARGE.

I AUTHORIZE MY SPOUSE, _____, TO MAKE CHARGES IN MY NAME.

AGREEMENT TO SETTLE CHARGE ACCOUNT

I understand that it is a privilege to charge goods and services received while associated with The Citadel. I understand that when I charge goods and services that I must pay for them. Furthermore, I understand that should I have a financial obligation to The Citadel that the obligation must be paid. If at any time, my account becomes 60 days past due, I agree to allow The Citadel to deduct the full balance from my paycheck. I understand that failure to meet my financial obligations resulting from charges to my account at The Citadel will result in my account being placed with a collection firm. I will be responsible for all collection costs, Attorney's fees and court costs incurred by The Citadel in collecting my delinquent account. If I fail to pay the obligation by the time of my separation, I authorize The Citadel to initiate any action deemed appropriate to collect any outstanding financial obligation, including deducting the amount I owe from my final paycheck.

Employee Signature

Date

ATTENTION GRADUATE AND PROFESSIONAL STUDIES/ TREASURER'S OFFICE

Please issue an identification card for the above employee. Please see the box checked above for status of charging privileges.

Human Resources Signature

Date