

# Staff Cash Advance Application Form

Sections 1 & 2 must be completed in full. This information is collected for the purposes of approving, issuing and administration of a Student cash advance.

(\*) Denotes a required field. Press the Tab key to advance to the next field

## 1. Personal Details

The information in this section is required by the University for the purposes of approving a cash advance to a Staff member conducting work on behalf of the University.

By completing and signing this application the applicant agrees to abide by all terms and conditions associated with the cash advance, detailed on the reverse side of this application form.

Title* (Tick one):	Dr	Mr	Ms	Prof	Other:	
First Name*:				Middle Name*:		
Surname*:				Date of Birth*:		
Department*:						
Phone Number*:				Staff ID Number* :		
Email Address*:						
Required Cash Advance Limit* (tick only one option):	\$500	\$1,000	\$1,500	Other Amount (please specify)		

**IMPORTANT NOTE:** By completing this form you are confirming acceptance of the terms and conditions overleaf.

## 2. Work Details:

The information in this section is required by University of Otago.

Cost Centre*:		Division Name*:	
Department Name*:			
Reason for Cash Advance*:			
Travel Start Date*:		Travel End Date*:	

## 3. Administrator Details: (Person who will be completing the Finance One Reimbursement and reconciling receipts)

Full Name:		Position:	
Finance One User ID:		Phone No:	
Email Address:			

## Cash Advance Terms and Conditions of Use

- A University of Otago cash advance will be approved on the express condition that the claimant will, at all times, take personal responsibility for following the University's related policies and procedures in relation to Cash Advance.
- Prior to the travel expiry date with the University of Otago, the claimant must ensure all purchases are supported by an itemized receipt and submitted to the person listed under 3. Administrator Details overleaf.
- Cash Advances are to be used to pay for goods and services, where expenditure is incurred on behalf of the University of Otago.
- Expenditure must be reasonable, appropriate and in accordance with the policies and procedures attached to all University of Otago related expenditure.
- Expenditure must be supported by appropriate documentation including an itemised receipt
- Any breach of Purchase policies or procedures may result in the claimant being responsible for a full reimbursement to the University.

## Confirmation of Identity

The claimant will receive the advance into their bank account held by Payroll via a Staff-Reimbursement

## Acknowledgment

I acknowledge that I have read, understood, and agree to adhere to the conditions set out above and in the University of Otago's Cash Advance Procedure.

I also understand that by completing this application I am providing personal information ('this information') about me which will be held securely by the University. I certify that all this information supplied is true, correct and complete in every respect and understand that if it is not true, correct and complete, this application may be declined. I agree to be bound by the conditions in this application in addition to any other conditions of use that may be imposed by the University from time to time.

Signature of Applicant	Signature of Head of Department
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Full name:

Full name:

Date:

Date:

Signature of Administrator	Signature of Team Leader Accounts Payable & Processing
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Full name:

Full name:

Date:

Date:

## Next Steps

- Scan and email the completed and signed form to: [accounts@otago.ac.nz](mailto:accounts@otago.ac.nz)