



## **CSUBUY Online Access Request Form**

The following Procurement Card holder has attended the CSUBUY training and reviewed the Training Guide, and is requesting access to the CSUBUY online ordering portal.

Name:	Phone Number:	Dept.:
Delivery Location (Building/Room): _		Email:
Did you attend the Training? Yes	No If No, did	you view the 1-hour Zoom Training Video? Yes
	ent policies. I assert that	Y portal. I agree to receive and process transactions in I attended the CSUBUY Training or that I viewed the
P-card Holder Signature		Pate
II. Transfer Cart (Non P-card Use	rs Only)	
Name:	Phone Number:	Dept.:
Delivery Location (Building/Room): _		Email:
P-card Holder Name (Transferring th	e cart to?):	
Did you attend the Training? Yes	No If No, did	you view the 1-hour Zoom Training Video? Yes
	listed above. I assert tha	BUY portal. I will be adding items to my cart and will at I attended the CSUBUYTraining or that I viewed the
Non P-card Holder Signature		ate
III. Approval ( <i>P-card Approver On</i>	ly. Must be Departme	nt Head or Fiscal Officer)
Name:		Title:
Dept.:	Phone Ext.:	Email:
I am authorizing this user to obtain	access to the CSUBUY N	Marketplace. I understand that I am responsible for al ance with CSUDH Procurement policies.

Complete and email to Sabrina Rodriguez at <a href="mailto:srodriguez@csudh.edu">srodriguez@csudh.edu</a>. You will then receive a confirming email inviting you to complete your registration on the CSUBUY portal.