

## Request for Authorization to Modify Credit Card Collection Activities

Department Name: \_\_\_\_\_

Program/Area Accepting Transactions: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

NOTE: If you plan to modify an existing approved collection activity, please contact the Compliance Office (x6070) to discuss the planned modifications. Significant modifications may pose new security issues, and will require re-evaluation and approval. Significant modifications include, but are not limited to the following:

- Using a new method to accept credit card receipts
- Using new/different equipment to process credit card transactions
- Changing or updating software used to process credit card transactions
- Changing location of collection/processing area
- Changing outside vendors for credit card processing or significant changes in the processing procedures

You should complete this form and request approval prior to making significant modifications to your current approved collection procedures or activity.

Provide a description of the portion of your current activities that you plan to modify:

Describe in detail the proposed modifications:

Please provide specific details related to proposed new equipment, new vendors, new software or software upgrades:

## Signatures:

Primary Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Dept. Chair/Director: \_\_\_\_\_ Date: \_\_\_\_\_

Attach additional information that you feel will assist us in understanding your request. Please return completed form to Compliance and Ethics, Bldg. 20W/ Rm. 158A.

## Questions/ Concerns:

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