



### Merchant Employee Change Form

**Purpose:** To notify the Controller's Office with any changes of personnel who process and/or store sensitive cardholder data for FSU Merchants. This includes any new hires or personnel who have just been assigned payment card processing and/or settlement duties or employees that have left their position as a payment card processor including supervisors.

**Instructions:** Complete form and submit to the Credit Card Manager at Student Financial Services via email, fax, or mail.

**Help:** For assistance or questions, please contact Curt Caito, FSU Credit Card Manager at 850/644-9475 ([ccaито@fsu.edu](mailto:ccaито@fsu.edu)) or Jill St. Angelo at 850/644-1551.

Date:	<input type="text"/>	Department:	<input type="text"/>	Location:	<input type="text"/>
Supervisor:	<input type="text"/>			Phone:	<input type="text"/>
Title:	<input type="text"/>			Email:	<input type="text"/>

**Select the Reason for Change:**

<input type="radio"/> New Hire	<input type="radio"/> No Longer with Dept or University
<input type="radio"/> Current Emp / New Job Assignment	<input type="radio"/> Other
<input type="radio"/> Current Emp / No Longer Assigned	

Employee:	<input type="text"/>	Phone:	<input type="text"/>	Date of Change:	<input type="text"/>
Title:	<input type="text"/>	Email:	<input type="text"/>		

**Check all that apply for employee who is assigned to payment card responsibilities:**

<input type="checkbox"/>	Reviewed FSU Payment Card Policy	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/>	Reviewed FSU Confidentiality Policy	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/>	Background check has been conducted	<input type="text"/>	Date:	<input type="text"/>
<input type="checkbox"/>	Has been given payment card training	<input type="text"/>	Date:	<input type="text"/>