

# Participant Gift Card Request Form

Completion of the following form outlines the process that will be used to ensure proper stewardship of gift cards for participants.

## Chartfield:

Fund	ORG	Function	Entity	Source	Purpose	Project
IRB # (if required): <input type="text"/>						

## Name, purpose and short description of study:

## Number of, denomination, and vendor for gift cards being requested (please include methodology used to determine denomination) Also include expected timeline for dispensing gift cards:

## Procedures for recording, storing, safeguarding and disseminating the gift cards (provide names of individuals with access, forms used and locations, e.g. safe/locked cabinet/safe).

Name of responsible custodian of the cards and all persons with access to the gift cards.

Procedure and person(s) responsible for reconciling the gift cards (provide names and forms used if not using the participant log provided).

Procedure for unused gift cards.

***Note: Upon expiration of the study, the expense for any unused gift cards that remain on SPNSR/SP490 projects must be transferred off the project and onto a non-sponsored chartfield.***

By signing this form, I confirm that the above outlined process will be applied to the participant gift cards requested and that I have read the University's Participant Incentive Gift Card Policy and Participant Reporting Guidelines.

<https://financialservices.ouhsc.edu/Policies-and-Procedures/participant-incentive-gift-cards>

<https://www.ouhsc.edu/policy/#19931991-section-557---participant-payment-policy>

<https://financialservices.ouhsc.edu/Forms/participant-log>

<https://financialservices.ouhsc.edu/Forms/participant-log-instructionsexample>

\_\_\_\_\_  
PCardholder's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Custodian's Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date