
PROVIDING DECLINING BALANCE CARDS TO UNIVERSITY PROGRAM PARTICIPANTS

Scope: All campuses served by Louisiana State University (LSU) Office of Accounting Services.

Effective: June 10, 2025

Purpose: The University hosts programs that bring junior high and high school students, undergraduate and graduate students and members of the workforce to campus for education and/or professional development. Providing “declining balance cards” for meals and other program related expenses to the participants assures the most efficient use of the program time allotted or may be necessary for participants who are campus residents during the program. Funds for TigerCASH, Paw Points or a Meal Plan will not be provided to any full-time employee.

Procedures:

The procedures outlined below should be followed for providing funds for meals or other program related costs via TigerCASH, Paw Points or a Meal Plan to program participants:

- A. The Program Administrator Initiates Form AS527, “Request for Declining Balance Cards for University Program Participants”, which provides basic information to aid in the review of the request. Please allow ten (10) working days for the approval and processing of the cards. The information required is as follows:
 1. Request Date
 2. Department
 3. Program Name
 4. Department contact, phone number and e-mail address
 5. Brief description of the participant’s function in the program
 6. Begin Date & End Date
 7. Requested Funds – TigerCASH, Paw Points or Meal Plan
 8. Account Number & Spend Category (SC0289) to be charged
 9. Participant Information
 - a. LSU ID (if the participant does not have an LSU ID then the department must work with ITS to generate one)
 - b. Participant Name
 - c. Amount of Funds Requested
 - d. Affiliation with LSU
 - e. Participation Status – Resident or Commuter
- B. The second page of Form AS527 lists the On Campus Dining Locations, an option for use of printers, use of copiers and an option for laundry. The Program Administrator must indicate which dining facilities are permitted to be used by their program’s participants.
- C. The Program Administrator and Dean, Director or Department Head must approve each page of the AS527.

- D. Once the departmental/college approvals are secured, the form should be routed to Accounts Payable for approval. Note: If the funds are provided by a sponsored agreement, the form should be routed to Sponsored Program Accounting before Accounts Payable can provide final approval.
- E. If approved by Accounts Payable, the form will be forwarded to the Tiger Card Office for processing and notice of approval will be sent to the Program Administrator. If the request is denied, the Program Administrator will be informed.
- F. The Tiger Card Office will process the request and provide the cards to the Program Administrator who will issue the cards to the program participants. It is recommended that the Program Administrator have the participants sign an acknowledgement of receipt of the card. Form AS527-A, "Receipt of Declining Balance Card", should be completed and maintained in the Program Administrator's file.
- G. In the event a participant does not arrive for the program, or leaves the programs prior to the end date, the Program Administrator should notify the Tiger Card Office to deactivate the card(s).
- H. The Auxiliary Services business office will process a journal entry to charge the account number provided and forward the JE to Financial Accounting & Reporting division of Accounting Services. At the end of the program, any funds remaining on the cards will be refunded to the program account number, via JE. Once the program concludes, the funds will no longer be available to the participants.



REQUEST FOR DECLINING BALANCE CARDS FOR UNIVERSITY PROGRAM PARTICIPANTS

AS527

Request Date	Department	Program Name	
Contact	Phone	E-mail	
Brief Description of Participant's Function		Begin Date	End Date
<input type="checkbox"/> TigerCASH	<input type="checkbox"/> Paw Points	<input type="checkbox"/> Meal Plan	
ID Type: <input type="checkbox"/> Color (\$2.50 each)			
Spend Category	Program	Project	
Gift	Grant	Cost Center	
Fund	Function	Additional Worktags	

Location Options	
<input type="checkbox"/> All	
<input type="checkbox"/> Print/Copy	<input type="checkbox"/> Food
<input type="checkbox"/> Vending Machines	<input type="checkbox"/> Laundry

#	LSU ID	Participant Name	Amount	Affiliation with LSU	Resident (R) Commuter (C)
1					
2					
3					
4					
5					
6					
7					
8					

Approvals	Signature	Printed Name	Date
Program Administrator			
Dean/Director or Dept Head/Chair			
Sponsored Program Accounting			
Accounts Payable/ Accounting Services			



REQUEST FOR DECLINING BALANCE CARDS FOR UNIVERSITY PROGRAM PARTICIPANTS

AS527

Request Date _____

#	LSU ID	Participant Name	Amount	Affiliation with LSU	Resident (R) Commuter (C)
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					

Approvals	Signature	Printed Name	Date
Program Administrator			
Dean/Director or Dept Head/Chair			
Sponsored Program Accounting			
Accounts Payable/ Accounting Services			