CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO
Student Financial Services

Prepared by: _____
Date: _____
Email: _____

CASHIERING LOCATION REQUEST

Purpose: This submission is required to receive approval from the University Controller to collect cash, checks and credit cards for the new fiscal year beginning July 1 and ending June 30.

Deadline: Submit this form to Student Financial Services by May 1 annually.

Section A. *(General Information)*

Type of Request: ☐ New ☐ Renewal/Modification ☐ E-Market ☐ Club/Student Org.

Effective for Fiscal Year (e.g., 2025-2026): _____

Department Name: _____ **Department ID:** _____

Cashiering Location: _____

MPP Department Responsible Person *(DRP)*: _____ **Phone:** _____ **Email:** _____

Authorized Cash Handlers: ***(Please note that all cash handlers must complete Cash Handling & PCI DSS training course annually.)***

1. Name _____ **Employee ID** _____

2. Name _____ **Employee ID** _____

3. Name _____ **Employee ID** _____

4. Name _____ **Employee ID** _____

5. Name _____ **Employee ID** _____

If your department has more than 5 cash handlers, please attach a list and indicate here: List attached ☐

Describe what payments will be collected for (*goods, services, donations*). Be specific.

Please explain why the main cashiering office cannot be used for these payments. Be specific.

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO
Student Financial Services

CASHIERING LOCATION REQUEST

Describe the cash collection point's security measures *(e.g., locked cash box, safe, cash register, etc.)*. Be specific.

Frequency of Collections (*check one*):

☐ Daily ☐ 1-2 times/week ☐ 3-4 times/week ☐ Weekly ☐ One-time event ☐ Other: _____

Typical amount collected per deposit (*check one*):

☐ $0 - $99 ☐ $100 - $249 ☐ $250 - $499 ☐ $500 - $999 ☐ $1,000 - $2,499 ☐ $2,500+

Will debit/credit card payments be accepted at this cashiering location? ☐ Yes ☐ No
If yes, complete section B, if no skip to section C.

Section B. *(Credit Card Processing Information)*

How will you accept credit cards?

☐ In-person ☐ Internet/eCommerce ☐ Mail ☐ Telephone ☐ POS Software ☐ Fax

Debit/Credit card acceptance methods (*check all that apply*):

☐ Swiped the card on a separate terminal to take the payment
Make and model # of payment terminal(s): _____ How many? _____
☐ Using imprint machines
☐ Manually recorded on paper documents
☐ Internet-based eCommerce webpage (i.e. Vendini)
Indicate payment application used: _____
(Please note: Staff should NEVER swipe the customers card for eCommerce transactions.)

I have reviewed the Payment Card Industry Data Security Standards ☐ Yes ☐ No

For each card payment method used below, estimate the annual dollar volume and number of transactions. You may use previous fiscal years totals.

In-person	$ _____	Transaction # : _____
Mail/POS System	$ _____	Transaction # : _____
Internet/eCommerce	$ _____	Transaction # : _____

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO
Student Financial Services

CASHIERING LOCATION REQUEST

Section C. *(Cash Handling Procedures)*

Submit your department's cash handling procedures with this form.

You may submit your own written procedures or complete the **Cash Handling Procedures Template** provided.

Procedures must address:

- **Cash receipt and collection process** (*how funds are received, recorded, secured*)
- **Deposit preparation and deposit process** (*how deposits are prepared, reviewed, and delivered/submitted*)
- **Review and reconciliation process** (*how activity is reviewed and reconciled, and by whom*)
- **Roles & approvals:** Use **position titles** (*not individual names*) to show who performs each step and who approves items such as deposits, refunds/voids, adjustments, etc.
- **DRP approval: Procedures must be approved by DRP (*signature required*).**

E-market procedures must address:

- **Approved platform & access:** Identify the approved payment system and who has access (*position titles)*
- **PCI/data security:** Indicate whether PCI DSS has been reviewed and ensure your procedures address: approved card acceptance methods/systems; access controls *(who can process, settle, refund)*; protection of card data *(no storage of card number/CVV; secure any printouts)*; no email/fax card payments; settlement + reconciliation steps *(reports, frequency, preparer/reviewer)*; and refund controls *(approval + documentation + method/timeframe)*.
- **Reconciliation & review:** Describe how online reports are reconciled and reviewed *(frequency; who reconciles; who approves)*
- **Refunds:** Describe refund approvals, documentation, and method/timeframes

Attachments (*check all that apply*)

☐ Submitting using **department format**

☐ Submitting using the **Cash Handling Procedures Template**

☐ Other supporting documentation attached:_____

Section D. *(Accounting Information)*

Funds deposited to:

Account: _____ Fund: _____ Dept.: _____ Class: _____ Project: _____

☐ State Fund ☐ UEC Fund

Account: _____ Fund: _____ Dept.: _____ Class: _____ Project: _____

☐ State Fund ☐ UEC Fund

Account: _____ Fund: _____ Dept.: _____ Class: _____ Project: _____

☐ State Fund ☐ UEC Fund

If you post to more than 3 accounts please attach them separately and note it below.

☐ Please see attachment for additional funds

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO
Student Financial Services

CASHIERING LOCATION REQUEST

Section E. *(Signatures and Approvals)*

Acknowledgment: *By signing below, the MPP Department Responsible Party (DRP) and Dean/Senior Director confirm that they have reviewed the Payment Card Industry Data Security Standards, this form, and the required Cash Handling/PCI training; understand their responsibilities under PCI DSS and the Administration & Finance Cash Handling Procedures; and certify that all employees who handle cash and/or payment cards have completed the required Cash Handling & PCI DSS training course.*

Signatures:

MPP Department Responsible Party (DRP)

Print Name	Signature	Date

Dean/Senior Director

Print Name	Signature	Date

Submit completed form to Student Financial Services (SFS):
Email: sfs@csusb.edu | Drop off: UH-035
Questions: sfs@csusb.edu | (909) 537-5162

Recommendations for Approval:

SFS Director	Signature	Date

Information Security Approval *(if applicable)*	Signature	Date

Approval:

☐ Request Approved ☐ Request Denied

University Controller / FTO Vice President	Signature	Date

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO
Student Financial Services

CASHIERING LOCATION REQUEST - INSTRUCTIONS

Section A. General Information

• Type of Request: Indicate whether you are submitting a new request or a renewal/modification.
• Fiscal Year: Enter the fiscal year this request applies to.
• Department Name and ID Number: Enter the department name and department ID for the collection site.
• Cashiering Collection Point: Enter the location of the collection site.
• Department Responsible Person (DRP), Phone, and Email: Enter the DRP's name and contact information. The DRP is responsible for all cash handling activities for this location and must be MPP level.
• Name and Employee ID # for all Cash Handling Employees: List all employees who will be collecting, preparing, verifying, and/or depositing funds. If additional space is needed, attach a list and indicate "List attached."
• Describe goods/services/events: Describe what you are selling/collecting and why the cashiering location is needed.
• Explanation for collecting payments outside of main cashier: Explain why payments cannot be made at the main cashiering office.
• Training Requirement: All cash handlers must complete required cash handling and PCI compliance training annually.
• Security Measures: Describe how funds will be secured during collection and storage (e.g., locked cash box, safe, locked drawer, etc.).
• Frequency of Collections: Check the option that best describes how often payments will be collected.
• Typical Amount Per Deposit: Check the range that best describes typical deposit amounts.
• Will Debit/Credit Cards be accepted?: If Yes, complete Section B.

Section B. Credit Card Processing Information

• How will credit cards be accepted?: Indicate all methods used (in-person, internet/eCommerce, mail, telephone, POS software, etc.).
• Method details: If using a terminal, provide make/model and quantity. If using an eCommerce site, identify the payment application used.
• PCI DSS: Indicate whether Payment Card Industry Data Security Standards (PCI DSS) have been reviewed.
• Annual volume and transaction estimate: Provide estimated annual dollar volume and number of transactions for each method used.

Section C. Cash Handling Procedures

• Submitting Cash Handling Procedures: Submit your department procedures with this request, or complete the provided Cash Handling Procedures Template.
• Procedures must address: Cash receipt/collection process; deposit preparation and deposit process; review and reconciliation; roles and approvals by position title; DRP approval.
• Attachments: Indicate whether procedures and any supporting documentation are attached.

Section D. Accounting Information

• Chartfield/Account: Provide the chartfield(s) where funds will be deposited (Account, Fund, Department, Program, Class, Project). Enter XR number if applicable.
• Deposited Entity: Indicate whether deposits are managed by the State or by UEC, as applicable.

Section E. Signatures and Approvals

• DRP: DRP must print name, sign, and date.
• Dean/Sr. Director: Dean or Sr. Director must print name, sign, and date.
• Acknowledgment: By signing, approvers confirm review of this request and required training/compliance expectations.

Submission

• Submit the completed form and attachments to Student Financial Services (SFS) using the contact method listed on the form.

CALIFORNIA STATE UNIVERSITY SAN BERNARDINO	**CASH HANDLING POLICIES AND PROCEDURES TEMPLATE**	Last updated date:
		Prepared by:
		Reviewed by:

Overview: Summarize purpose for taking payments (i.e. The department accepts cash and checks at the box office, and credit card payments online through a third party system for ticket sales, subscriptions, and donations).

Daily Procedures: Indicate process for accepting and logging receipts, endorsing checks, issuing receipts.

(Provide overall procedure for handling cash and cash equivalents; i.e. All checks are immediately endorsed upon receipt, receipts are issued to customer, duplicates are attached to the deposit transmittal form.)

Physical Protection of Cash and Cash Equivalents: Indicate how receipts will be secured (i.e. safe, lock box), access to receipts/safe. (A log must be maintained for individuals that have access to the safe. Safe combination changes should be logged; i.e. All cash and cash equivalents are placed in a locked bag in the safe. Only two employees have access to the safe. When an employee leaves a request to change the safe code is submitted...).

Deposits and Transfers to the Main Cashier or Bank: Indicate how receipts will be deposited/transported to bank/main cashier. (Receipts should be deposited at least weekly or whenever collections exceed $500.00, two employees must transport deposits, a police escort is required for deposits greater than $2,500.00; i.e. Deposits are transported to the main cashier daily in dual custody. Cash transmittal forms are signed by the Technician I and verified by the Technician II.)

Internal Controls and Segregation of Duties: Indicate how segregation of duties will be maintained.
(Accepting payments, reconciling, preparing deposits, and verifying deposits should be performed by different employees. i.e. Payments are accepted by the Accounting Technician, the reconciliation is performed by the department AAS. Deposits are prepared by the Accounting Technician and verified by the Technician II.)

Inventory: If applicable, describe how inventory will be tracked (A reconciliation between inventory and sales must be performed; i.e. All inventory is secured in a locked safe accessible to the Department Head and the cashiering supervisor. All ticket sales are logged and reconciled by the AAS.)

Voids and Refunds: Please indicate who will be responsible for approving and reporting voids and refunds.
(Employee accepting cash should not void transactions or issue refunds; i.e. Voids are approved by the cashiering supervisor. All refunds are prepared by the cashiering supervisor and approved by the department manager).

Overages and Shortages: Indicate how overages and shortages will be reviewed and reported. (Chain of Command; i.e. Overages and shortages will be reported to the department supervisor immediately. Shortages over $100.00 will be reported to the Student Financial Services Lead.)

Customer Receipts: Indicate the type of receipts that will be provided to customers. (Triplicate pre-numbered receipts must be issued for in-person payments; i.e. All customers are issued the original white copy of the pre-numbered receipt. The pink copy of the receipt will be attached to the deposit transmittal form and the yellow copy will be maintained in the department).

Mail Payments: Indicate the procedure for logging mail receipts. (All receipts received by mail must be logged; i.e., All checks received by mail are logged. The checks are prepared for deposit then reconciled to the log on a daily basis...).

Daily Closing Procedure: Describe how receipts will be reconciled at the end of the day. (i.e., At the end of the day, each cashier balances the cash received to the log of services provided. After balancing, all payments are placed in a locked bag in the safe by the cashiering supervisor)

Reconciliation: Indicate who will be performing the reconciling of receipts to the ledger.
(Position of individual responsible for performing monthly reconciliation. i.e. Reconciliations to the General Ledger are performed by the Department AAS on a monthly basis and are approved by the Department Manager.).

Petty Cash Fund: If applicable, indicate what procedures will be used to reconcile the petty cash fund.
(All petty cash funds must be approved by the Director of Accounting; i.e. The petty cash fund is reconciled monthly by the department AAS. The department supervisor ensures that the funds are reconciled).

Change Fund: If applicable, indicate what procedures will be used to reconcile the change fund.
(All Change funds must be approved by the Director of Accounting; i.e. The change fund is reconciled each day by the lead cashier. The department supervisor ensures that all change funds are reconciled).

Other Comments: