

Ball State University
VEHICLE REQUEST FORM

Submit **SEPARATE** Form for Each Vehicle Requested

TO BE COMPLETED BY TRAVELER WITH AUTHORIZATION FOR TRAVEL FORM

Driver's Name		Department	
Destination		Account Number	
Date of Departure		Date of Return	

Vehicle Type Requested (Check One)

<input type="checkbox"/>	5 passenger CAR	<input type="checkbox"/>	Equipment Van	<input type="checkbox"/>	One-way Airport
<input type="checkbox"/>	7 passenger VAN	<input type="checkbox"/>	8 passenger VAN	<input type="checkbox"/>	Other

List All Passengers Accompanying Driver

I certify that I hold a valid U.S. driver's license, and I will abide by the Travel Regulations for the use of university-owned and/or leased vehicles.

Signature of Driver

Date

Print form, sign, and attach to completed Authorization for Travel

TO BE COMPLETED BY TRAVELER AT COMPLETION OF TRIP

	Date of Return	
Ending Odometer Reading	Time of Return	AM / PM

Report any incidents, breakdowns, vehicle problems (Use back of this sheet if necessary)

TO BE COMPLETED BY TRANSPORTATION OFFICE

Vehicle # Assigned:	Beginning Odometer Reading:	Date of Departure:	Time of Departure:
			AM / PM

# Miles Traveled		Cost Per Mile		Total Mileage Charge	
# Days Used		Daily Rental Fee		Total Daily Charge	
Total Vehicle Charge					