

Arkansas State University

Vehicle Request Form

Print Form

(Separate forms are required for airport rentals only.)

To be Completed by Requesting Department:

Issue Vehicle To: ASU ID: Cell Phone No:

Department: Has employee received permission to drive? Yes No
(Submit VSP forms to Sandra Sherman, if not.)

Traveler Email:

Point of Contact (POC): POC Phone: POC Email:

Vehicle Information:

Pick Up Date: Pick Up Time: Pick Up Location:

Vehicle Type: Number of Passengers: Destination:

Official Business to be Performed:

Drop Off Date: Drop Off Time: Drop Off Location:

List Additional Drivers by ASU ID and Name:

Funding Source:

Fund-Orgn-Acct-Prog

Driver Signature: _____ Dean/Department Head Signature: _____

Please do NOT send through Interdepartmental Mail!

Scan and email completed form to rentalcars@astate.edu. For questions call 870-972-3903.

For Rental Car Administration Use Only:

Confirmation No: _____
Vehicle Cost: _____
Fuel Cost: _____
Total Cost: _____

Comments: