Student Organization & Sport Club Fleet Services Vehicle Request Form

submit to Student Org Business Office (157 IMU)

Name of Organization:	Name of Contact Person:				
Phone Number:	E-mail:				
Destination:	Purpose:				
Vehicle Will Be Picked Up*	Vehicle Will Be Returned				
MO DAY YR HOUR	MO DAY YR HOUR				
TYPE OF VEHICLE (number of seatbelts)	Will you be leaving a personal vehicle? YES NO				
 Midsize Sedan (5) Minivan (7) 	If yes, please provide:				
 Cargo Van (2) 	License Plate Number:				
• Large SUV (6-9)	State:				
 o Box Truck (3) o ¾ ton truck (5) 	Vehicle Make (Ford, Toyota, etc.):				
 Accessible van 					

Would you like an IPASS (Illinois) or K-TAG (Kansas) transponder for tolls? YES NO

Primary Driver

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Name:	HawkID:	E-mail:	Cell Phone #:
Secondary Driver			
Name:	HawkID:	E-mail:	Cell Phone #:
Secondary Driver			
Name:	HawkID:	E-mail:	Cell Phone #:
Secodary Driver			
Name:	HawkID:	E-mail:	Cell Phone #:

Number of Passengers:	Passengers are:	Staff	Students	Other:
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MFK for payment:

	49	4690			6058	000			0000
Fund	Org	Dept	Sub-Dept	Grant/Program (account number)	I-acct	O-acct	D-acct	Fn	Cost Ctr