

University of Notre Dame
TRANSPORTATION SERVICES
Vehicle Rental Request Form

Date needed:

Group / Department:

Contact person:

Email address:

Phone number:

Purpose of trip:

Number of passengers:

Type of vehicle requesting:

Has driver attended training/orientation session? Yes No

Is driver at least 18 years old? Yes No

Time needed:

Destination:

Return date:

Return time:

Date of request:

Account number:

Authorization signature: _____

if student group request, authorization must be from Student Activities Office

Typed / printed name:

Title:

Departmental

Student Activities

Student Group Travel

I have read the vehicle user policy, and I agree to the terms and charges as described.

Driver signature: _____

Typed / printed name:

Title:

Please complete and fax to Marty Ogren, Transportation Services, FAX to 631-9654.

Transportation Services Approval: Yes No

Additional Comments: