

Office Use Only: Vehicle # _____ Reservation # _____

Vehicle requests must be made in accordance with various State laws and policies, including NDCC 39-01-03, SBHE Policy 512, State Fleet Policy Manual, SBHE Policy 611.12 Use of State Vehicles, and NDCC ch. 32-12.2. State fleet vehicle use must be for authorized purposes and official business of North Dakota State College of Science or official state business.

Instructions

1. Complete form and click submit or send to ndscs.fm@ndscs.edu. **All fields are required.**
2. Drivers must possess a valid driver's license and present their license when picking up the vehicle.
3. Authorized signature is **required** for depletion of funds and request validation.
4. If vehicle use involves STUDENT PASSENGERS or STUDENT DRIVERS, an Authorized Student Use form must be submitted prior to the vehicle being released.
5. Large van training is required for 15-passenger van use; please call 701-671-2313 for more information.
6. [State Fleet policy manual](#) is in the glove compartment and online.
7. Find Risk Management coverage information can be found at [Vehicle Coverage FAQs](#).

Driver Information

Name: _____ Employee ID#: _____ Phone Number: _____

Email: _____ Driver's License **Expiration Date:** _____

List all Passengers: _____

If vehicle use involves students, fill out Authorized Student Use form [here](#).

Trip Information

Departure Date: _____ Departure Time: _____

Return Date: _____ Return Time: _____

Destination: _____

Purpose of Trip (**Be Specific**): _____

Vehicle Information

<input type="checkbox"/>	Sedan/SVU FWD	<input type="checkbox"/>	Hydraulic Lift Pickup
<input type="checkbox"/>	Minivan	<input type="checkbox"/>	Enclosed Trailer
<input type="checkbox"/>	Pickup	<input type="checkbox"/>	Flatbed Trailer
<input type="checkbox"/>	15-Passenger Van	<input type="checkbox"/>	SUV AWD

Funding and Authorization

Funding Number: _____ Dept. Number: _____ Project Number: _____

Department Name: _____

Authorized Signature: _____