

GRAMBLING STATE UNIVERSITY
OFFICIAL CAR RENTAL REQUEST FORM
Submit completed form with your Travel Authorization

SECTION 1 - TRAVELER INFORMATION

Name of Traveler: _____
G Number _____
Email Address: _____
Mobile Phone Number: _____
Department Name: _____

SECTION 2 - TRIP DETAILS

Purpose of Travel: _____
Destination (City/State): _____
Departure Date/Time: _____
Return Date/Time: _____

SECTION 3 - RENTAL VEHICLE DETAILS

Rental Type Requested (☐ Sedan ☐ SUV ☐ Van ☐ Truck); **Prior Approval for Premium and Elite Rental:**
Estimated Number of Travelers: _____
Names of the Travelers: _____
Pickup Location: _____
Drop-off Location: _____

SECTION 4 - FUNDING & APPROVAL

Out-of-State Rental (**requires Prior Approval from the President**)? (☐ Yes ☐ No)
Pickup Location: _____
Drop-off Location: _____
Charged to CBA Card? (☐ Yes ☐ No) If No Explain Funding source: _____

SECTION 5 - DRIVER CERTIFICATION

Primary Driver's Name: _____
Defensive Driving Completed? (☐ Yes ☐ No)
Driver's License Number: _____
State of Issuance: _____
Expiration Date: _____

SECTION 6 - ATTACHMENTS REQUIRED

Approved Travel Authorization
Defensive Driving Certificate
Rental Justification Letter
Conference Agenda (if applicable)
Prior Approval Letter