



**University of Wisconsin-Superior
Parking Services Office**

**NON-STATE EMPLOYEE
PASSENGER AUTHORIZATION FORM**

State Employee Authorized Driver Name	
Non-State Employee Name	

Date(s) of Trip			
	Year	Month	Day(s)

Destination(s)	City(s)	State(s)

Purpose of Trip

Reason for Non-State Employee to Ride in State Vehicle
(See State Risk Manual)

Risk Management Review Agency Signature Designee Jan Hanson, Vice Chancellor		
	Date	