**University of Virginia** 

Department of Parking and Transportation 1101 Millmont Street P.O. Box 400000 Charlottesville, VA 22904 434-924-7231

## University of Virginia: Air Services Use Authorization Form Revised 5/24/2023

Pilot Information John Farmer Anthony Sanchez Phone: 434-531-4727 Email: jpf3x@virginia.edu		A Cessna seating u is based	cy Airplane a Citation XLS jet capable of up to eight people. The airplane at the General Aviation terminal arlottesville-Albemarle Airport.	
Check the box to the left to confirm that Air Transportation Service (PRM-001). To Please note that the UVA airplane should are more costly or that the combination UVA airplane.	his policy is a double to the best of the	vailable at <i>uvapolicy.virg</i> y in cases where it can b	finia.edu/policy/PRM-001 e shown that commercial flights	
Department Information Please fill out the following section with your depart	tment's inforn	nation:		
Department Name:				
Phone Number:				
Street Address:				
City:	State:		Postal Code:	
Contact Name:				
Contact Phone Number:				
Contact E-Mail Address:				
Alternate Phone Number:				
Flight Information Please fill out the following section with the details	of your flight:			
Departure Date:		Departure Time:		
Destination:				
Purpose of Trip:				
Return Nate:		Return Time:		

Passenger Information Eligible passengers of the University's airplane and for privat	e air service include:		
All state employees			
Employees of the University of Virginia related Foundations and Corporations			
the President, Executive Vice President & COO, or the President, Executive VP & COO, or VP for Finance mus	ection with University functions and activities as approved by Vice President for Finance, in writing. [A written request to the t include the specific University function or activity and guest or ion for using the University airplane or transportation service.]		
Name	Affiliation (Student, Faculty, Staff, Other)		
Invited Guests:  Name	Affiliation		
Name	Ailliation		
Billing Information			
Responsible Department:			
Company:	Cost Center:		
Business Unit:	Fund:		
Gift/Grant/Designated/Project:	Program:		
Function:	Activity:		
Other:			
Approvals			
Executive Vice President:	Date:		
President:	Date:		
Approval for Invited Guests			
President:	Date:		