



# Bilkent University

## Vehicle Sticker Request Form

(Please fill in with a dark pen and read the information overleaf.)

### Driver Information

Sticker Type	Personnel: <input type="checkbox"/> Academic Personnel <input type="checkbox"/> Administrative / Support&Contract		
	Student: <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student		
Other: <input type="checkbox"/> Company <input type="checkbox"/> Alumni			
Student / Employee ID number			
Name - Surname			
Title and Position			
Faculty - Department - Year / Department (Students) - (Personnel)			
E-mail Address			
Home Address Phone Numbers: Home Work Mobile			
Driver's License	Place Issued	Date issued	
	License Number	Blood Type	

### Vehicle and Registration Information

License Plate Number		_____
Relation to Vehicle Owner		
Make - Type		
Model - Color		
Vehicle Registration	Place Issued	
	Registration No.	
	Registered Owner	

I hereby declare that the information above is correct and that I will obey the rules overleaf.

Name - Surname		Date	/ / 20	Signature	
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This section will be filled out by office staff.

Sticker No.					
Driver No.					
Receipt No.					
Sticker Issued by		Date	/ / 20	Signature	
Computer Entry by		Date	/ / 20	Signature	