Students, faculty, and staff who have mobility impairments, temporary or permanent, may be eligible to use the **FSU Accessible Van**. Priority will be given to those individuals with permanent mobility impairments, but every effort will be made to accommodate those with temporary impairments.

Potential riders must complete an application (which can be obtained at the **Student Disability Resource Center, 108 Student Services Building**) and provide documentation that supports the use of van transportation. The accessible van is available M-F from 8:00 a.m.-4:00 p.m.

The van is only for **on-campus** transportation. Transportation to and from campus is the sole responsibility of the rider.

**FSU Accessible Van Rules and Regulations**

1. You must complete the application and be approved in order to be eligible to ride the FSU Accessible Van.
2. In order to ride the FSU Accessible Van, you must call 24 hours in advance or set up a permanent schedule. You must submit a written request for a permanent schedule.
3. The maximum time the van will wait for a rider is five minutes. Please be on time! If you repeatedly fail to show for a ride, you will be given verbal, a written warning, then removed from the list of eligible riders.
4. No eating, drinking, or use of tobacco products in the van.
5. You must wear seatbelts at all times. Riders who use wheelchairs must also use a personal seatbelt that secures them in the chair.
6. Only faculty, students, and staff who have disabilities may ride the van.
7. The driver has the final say in any decisions made enroute. Any disruptions and/or inappropriate or abusive behavior WILL result in the discontinuing of van services and will be reported to the FSU Office of Student Rights and Responsibilities.
If you have any questions or concerns regarding the FSU Accessible Van, please contact the Student Disability Resource Center (850) 644-9566.

The van service is complementary. The university is **NOT** required to provide van transportation, but because the university encourages full participation of all students, faculty and staff, this complementary service is provided. All riders are encouraged to be respectful of the service and the service providers.

Rider Application

Last Name: _________________________

First Name: _________________________

Address:  _______________________________________________________________

E-mail: _________________________

Student ID#: _________________________

Main Phone Number: _________________________

Alternate Phone:  _________________________

Reason for Service Request:

__________________________________________________________________________

Is this disability temporary? YES [ ] NO [ ][ ]

If yes, expected Duration of Service: _________________________

FSU Affiliation:    Student  Faculty   Staff

[ ]    [ ]    [ ]

Do you use any of the following mobility aids? (Check all that apply)

Leg/Knee Brace [ ]  Service Animal [ ]

Manual wheelchair [ ]  Cane [ ]

Power wheelchair [ ]  Crutches [ ]

Power scooter [ ]  Other (Explain) [ ]
Schedule: Need for Services

Monday: ___________________
Tuesday: ___________________
Wednesday: ___________________
Thursday: ___________________
Friday: ___________________

Additional Information:

_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

I hereby certify that the information given above is correct. I am an FSU student, faculty, or staff member. I have read the rules and regulations of the FSU Accessible Van and agree to abide by them.

________________________________________
Signature    Date

________________________________________
SDRC Staff Signature    Date