Airport to Campus Transportation

AUS Fleet Management Services

New, first-time AUS students can request transportation to the residential halls from either the Sharjah International Airport or Dubai International Airport.

<u>Fees</u>

From Sharjah International Airport (SHJ) (10-minute drive from campus)

- Taxi to campus: Approximately AED 50
- **AUS vehicle to campus:** AED 100 (includes up to 2 hours waiting upon flight arrival. Additional hours will be charged AED 25 per hour plus additional parking as applicable).

From Dubai International Airport (DXB) (30-minute drive from campus, depending on traffic)

- Taxi to campus: Approximately AED 100, depending on arrival time and traffic
- **AUS vehicle to campus:** approximately AED 250 (includes up 2 hours waiting upon flight arrival; additional hours will be charged AED 25 per hour plus additional parking as applicable).

How to Book an AUS Vehicle

To request an AUS vehicle pick-up from the airport, please complete this form and attach the flight ticket and email it to <u>fleetmanagement@aus.edu</u> **at least three days in advance** of your expected arrival. Any changes, such as a flight delay or cancellation, must be sent to AUS Fleet Management Services (<u>fleetmanagement@aus.edu</u>) or to the Fleet Management Supervisor on +971 6 515 2171.

Late-Night Arrivals

You will need to contact the complex manager to grant you access to the residential hall when arriving at night. The telephone numbers for the complex managers are as follows:

Women's Complex Manager +971 56 112 7180 Men's Complex Manager +971 50 630 5473

Name (as per your passport)							AUS ID number					
Flight Number Which resi		Sharjah Airport • dential hal	Dubai Internat Airport • I are you assigne	International Airport •		Dubai terminal number 1 • 2 • 3 •		Date of Arrival		Time of Arrival: • AM		
Yo	ur Telep	hone Num	ber(s)		Your	mail						
			Tra	ansport	ation Departr	nent l	Use only					
SI		Vehicle		Mileage			Time					
#	Туре	Plate #	KM OUT		N T	otal	OUT	IN	Total	Parking	Food	
Driver's Name:					Signature:			Date:				
MS Supervisor's Name:					Signature:			Date:				
				Fir	nance Departr	nent						
Fees	deposit to	account :	3532 / 44190									
Budget Accountant : Sign:							Da	te:				