



Vehicle Request Form

Date: _____ Requested By: _____

Driver(s): _____

Destination(s): _____

Date(s) Needed: _____

Departure Time: _____ Return Time: _____

Vehicle Needed:

- ☐ Bus
- ☐ Car
- ☐ Mini-van
- ☐ Equinox
- ☐ No Preference

Account to be charged:

- ☐ General Operating
- ☐ TRIO
- ☐ On Course for College
- ☐ Perkins
- ☐ CTE
- ☐ Embark
- ☐ Other: _____

Department:

- | | |
|-----------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Academic Success Center | <input type="checkbox"/> Electrical Construction & Maint. |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Emergency Medical Services |
| <input type="checkbox"/> Admissions | <input type="checkbox"/> Library |
| <input type="checkbox"/> Arts & Sciences | <input type="checkbox"/> Medical Assisting |
| <input type="checkbox"/> Automotive Collision Repair | <input type="checkbox"/> Medical Coding |
| <input type="checkbox"/> Automotive Technology | <input type="checkbox"/> Nursing |
| <input type="checkbox"/> Building Construction Technology | <input type="checkbox"/> Plumbing & Heating |
| <input type="checkbox"/> Business Office | <input type="checkbox"/> Registrar |
| <input type="checkbox"/> Business Technology | <input type="checkbox"/> Structural Welding |
| <input type="checkbox"/> Computer Numerical Control | <input type="checkbox"/> Student Affairs |
| <input type="checkbox"/> Continuing Education | <input type="checkbox"/> Water Treatment Technology |
| <input type="checkbox"/> Development Office | <input type="checkbox"/> Wind Power Technology |
| <input type="checkbox"/> Diesel Hydraulics | <input type="checkbox"/> Workforce Development |

Signature of Requester: _____

Travel Authorized By: _____

Please return the Vehicle Request Form **at least 1 week in advance to your immediate supervisor.**