

## Trip Request

Department: \_\_\_\_\_

Driver's Name(s): \_\_\_\_\_

Driver's License No: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Start Date: \_\_\_\_\_ Return Date: \_\_\_\_\_

Total Trip Miles: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for Trip: \_\_\_\_\_

Vehicle No: \_\_\_\_\_ Vehicle Tag No: \_\_\_\_\_

By signing this report, I acknowledge that I have:

1. A valid Driver's License
2. Not had my driver's license suspended or revoked within the past three years
3. Passed the Safe Driving Course on (Date) \_\_\_\_\_ for 15-passenger vans I also give my permission to the CollegePolice Department to do a background check and give the results to my department chair/head.

Print Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date

Effective July 1, 2018