



Vehicle Request Form

Instructions:

1. Please fill in completely.
2. Submit to Facilities Services in advance as follows:
 - a. Minimum 2 business days for local trips
 - b. Minimum 5 business days for extended trips (over 8 hours, out of town, overnight)
3. A copy will be returned to you as your confirmation.
4. **Driver must be approved one week prior to trip through Business Services, Administrative Secretary.**

Name of Group/Class _____ # of Participants _____

Employee Making Request _____ Index/Org. Code _____

Destination (City/State) _____ Estimated Miles _____

Date/Time of Departure _____ Date/Time of Return _____

Driver's Name _____

Beginning Mileage _____ Ending Mileage _____

Vehicle Requested (Passenger count includes the driver)

POLICIES APPLYING TO THE USE OF COLLEGE-OWNED VEHICLES

1. Special Notice: **NO K-12 OR EFE STUDENTS ARE PERMITTED TO RIDE IN 11-PASSENGER VANS.**
2. No alcoholic beverages will be allowed in the vehicles.
3. Place of boarding/return at KVCC will be south of the building, near Receiving.
4. For cruiser use, a photocopy of a valid CDL must be on file in the Finance & Business Office.
5. The driver will be responsible for :
 - a. Providing a copy of driver's license to the Administrative Secretary in the Finance & Business Office for annual approval.
 - b. Picking up the paperwork and keys prior to departure (on Friday for weekend trips)
 - c. Checking out and using gasoline cards, and returning all receipts after the trip.
 - d. Insuring that no hitchhikers are allowed in the vehicle.
 - e. Complying with all local and state vehicle ordinances and will be the final judge regarding their applicability to the vehicle and the actions of the group
 - f. Paying and accounting for all toll-road fees.
 - g. Returning the vehicle in a condition comparable to the condition when the vehicle was taken, and reporting any damage or problems encountered during the trip promptly.
 - h. Securing the vehicle if it is to be left outside overnight or for extended periods of time.
6. Notifying Security if personal vehicles will be left overnight.

I have read and understand the policies listed above and have confirmed through the Business Office that the driver is an approved KVCC driver.

Employee Signature _____ Date _____

Administrator Signature _____ Date _____

Materials Handling Use Only

Your request has been received and your vehicle **IS / IS NOT** available

Approved Driver **Yes No**

You have been assigned _____