

Request for Use of District Owned Vehicle  
**Please fill out form and forward to the Transportation Department**

**Pre-Trip:**

Requesting staff member: \_\_\_\_\_

Purpose of the trip: \_\_\_\_\_

Destination: \_\_\_\_\_

Date(s) to use vehicle: \_\_\_\_\_ through \_\_\_\_\_

Time to pick up vehicle: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m. Time to drop off vehicle: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

**I have verified the following:**

- I will not use the van for any reason other than the assigned trip**
- There is a safety belt for each passenger and use is required (7 passenger van)
- The driver has a valid driver's license and has not received seven or more points for motor vehicle violations.
- Each student's parent is aware of the transportation provided and has signed a written consent.
- No person other than the driver listed above will be driving the vehicle during the trip.
- I have/will receive (d) the district credit card and will use it only for pre-approved expenses; such as, gas fill up. (Only charge an amount to get safely home. Our bulk purchases are far less expensive.)
- I will not allow any smoking in the van.
- I will not consume any alcohol and drive the van

Signature of staff member: \_\_\_\_\_

- Transportation Approved                       Transportation Not Approved

Signature of Transportation Director: \_\_\_\_\_ Date: \_\_\_\_\_

**Post Trip:**

Mileage @ start of trip: \_\_\_\_\_ Mileage @ end of trip: \_\_\_\_\_

Gasoline pumped: \_\_\_\_\_ gallons                      Vehicle is cleaned of debris:  Yes  No

Did you have any mechanical problems with the vehicle? If yes, explain:  
\_\_\_\_\_  
\_\_\_\_\_

## **Request for Use of District Owned Vehicle**

Please fill out the beginning and ending mileage the vans.

The round Master key will open the lock on the gate; the square key will open the lobby door. Please hang the keys on the keyboard in the lobby. It is important that the keys are left.

Thanks, and have a good trip.