UNCP JAMES B. CHAVIS UNIVERSITY CENTER
VEHICLE REQUEST FORM

(Users must review the Vehicle Usage Policy and complete the Vehicle Authorization Form)

[] Vehicle Requested: [ ] 9 Passenger Van [ ] 12 Passenger Shuttle Bus

Destination: _____

Purpose of Trip: _____

Name of Driver: _____

Email Address: _____ Cell: _____

Driver's License #: _____ Expiration Date: _____

Number of Passengers: ____ Passenger List: _____

_____

Date & Time of Departure: _____

Date & Time of Return: _____

Odometer Reading at Start of Trip: _____

Odometer Reading at Return to Campus: _____

Total Mileage: _____

Driver's Signature: _____

(I have read the Vehicle Usage Policy and agree to the terms of usage)

Departmental Supervisor's Approval of Trip: _____

Additional Approval: _____

University Center Director or Vice Chancellor for Student Affairs

Account # to be Charged To: _____

Note: If the vehicle is returned after 5:00 p.m. or on weekends, park it in the Facilities Operations parking lot and lock it. Return the keys and mileage form to the University Center Office on the following work day by 12 noon.

****

****MINIMUM CHARGE PER VEHICLE: VAN - $15; MINIBUS - $25****

****

FOR OFFICE USE ONLY:

	VAN	MINIBUS
_____ MILES (x)	[ ] .43 PER MILE (Student Affairs Division Only)	[ ] .63 PER MILE = $_____
	[ ] .56 PER MILE	[ ] .73 PER MILE