



Vehicle Request Form

To reserve a rental vehicle for college-related travel, please complete and submit this Vehicle Request Form and the Driving Record Review Authorization Form (if one is not already on file) to:

Valerie Wenger, Facilities Operations Secretary, DF 117, vwenger@wccnet.edu, Fax: 734.677.5475, O: 734.677.5300

PLEASE NOTE: TO ENSURE AVAILABILITY, REQUESTS OR SCHEDULE CHANGES NEED A 7-CALENDAR DAY ADVANCE NOTICE.

DAY and Date Vehicle Required: _____ Time: _____

DAY and Date Vehicle Returned: _____ Time: _____

Destination: _____

Destination Address: _____ City: _____ State: _____

Number of Persons to be Transported: _____ ROUND-TRIP MILEAGE: _____

Purpose: _____

Please specify the number of vehicles you are requesting: _____

Note: Vehicles available onsite Winter 2020 semester include one 15-seat van and two 7-seat minivans.

It is the responsibility of the requestor to allow only the approved licensed drivers listed below to operate the vehicle(s).

Driver's Name(s) & Email Address:

Name	Driver's email address:
Name	Driver's email address:
Name	Driver's email address:

Requested By:	Date of Request:
Campus Address:	Phone:
Dean or Executive Officer Approval:	Requestor's Department Name & Org. Number:

Facilities Management Use Only

Vehicle Assigned	Assigned By	Date
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