



Trip Itinerary Form

Thank you for requesting use of one of the faculty/staff vehicles. Please complete the top portion of this *Trip Itinerary Form* and return to the Office of the Provost (Unit 993).

Name of Person Reserving the Vehicle: _____

Driver(s): _____

_____ Cell Phone: _____

Department/Unit: _____ Extension/Phone #: _____

Vehicle is needed from: (Date) _____ to (Date) _____

I would like to pick up keys on (Date): _____

Destination/Reason for Trip or Field Experience:

For Completion on Date Keys are Issued:

Tolls must be paid along the trip. Tolls incurred by vehicles displaying an I-PASS will be absorbed by the Provost's Office. Expense for gas and tolls incurred by vehicles NOT displaying an I-PASS will be reimbursed once appropriate receipts are provided.

Keys released to:

PRINT NAME: _____

Signature: _____

Driver Not the Driver

Date: _____

For Office Use Only

- | | |
|---|---|
| <input type="checkbox"/> Calendar | <input type="checkbox"/> Fuel Status (3/4 Tank or More) |
| <input type="checkbox"/> Drivers License(s) on File | <input type="checkbox"/> Transportation Policy Signed |
| <input type="checkbox"/> Proof of Insurance on File | <input type="checkbox"/> Vehicle Returned / Keys Received _____ |
| <input type="checkbox"/> Keys Issued _____ | |
| <input type="checkbox"/> Mileage Out _____ | Mileage In _____ |