

# SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT TRANSPORTATION REQUEST/REQUEST TO DRIVE

COLLEGE OF SAN MATEO     
  CAÑADA COLLEGE     
  SKYLINE COLLEGE     
  DISTRICT

APPROVED BY \_\_\_\_\_ DIVISION/DEPARTMENT \_\_\_\_\_

DATE OF TRIP \_\_\_\_\_  DISTRICT       STUDENT BODY

PURPOSE OF TRIP \_\_\_\_\_

DESTINATION \_\_\_\_\_

VEHICLE WILL BE NEEDED \_\_\_\_\_ DATE \_\_\_\_\_ TIME  A.M. \_\_\_\_\_  P.M. \_\_\_\_\_

ESTIMATED RETURN \_\_\_\_\_ TIME  A.M. \_\_\_\_\_  P.M. \_\_\_\_\_

NO. OF PERSONS \_\_\_\_\_ VEHICLE REQUESTED:  STATION WAGON  SEDAN  TRUCK  CHARTER

REMARKS: \_\_\_\_\_

NAME OF DRIVER \_\_\_\_\_ DRIVERS LICENSE NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

I HAVE       HAVE NOT BEEN CONVICTED FOR TRAFFIC VIOLATIONS IN THE PAST THREE YEARS.

IF YOU HAVE ANY CONVICTIONS FOR TRAFFIC VIOLATIONS (EXCLUDE PARKING VIOLATIONS) DURING THE PAST THREE YEARS, PLEASE INDICATE THE NUMBER, TYPE AND DATE OF CONVICTIONS.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE NOTE: ANY PERSON WITH THREE OR MORE TRAFFIC VIOLATION CONVICTIONS WILL NOT BE PERMITTED TO DRIVE A DISTRICT VEHICLE.

I CERTIFY THAT I HAVE ANSWERED THE ABOVE STATEMENTS TRUTHFULLY

DRIVERS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED \_\_\_\_\_ DEAN OF INSTRUCTION \_\_\_\_\_ DATE \_\_\_\_\_ APPROVED \_\_\_\_\_ DIRECTOR OF OPERATIONS \_\_\_\_\_ DATE \_\_\_\_\_

**THE FOLLOWING ITEMS WITH CHECK MARKS (✓) ARE TO BE COMPLETED BY DRIVER**

✓	SPEEDOMETER FINISH		✓	TIME OF DEPARTURE	<input type="checkbox"/> A.M. _____	<input type="checkbox"/> P.M. _____
✓	SPEEDOMETER START		✓	TIME OF RETURN	<input type="checkbox"/> A.M. _____	<input type="checkbox"/> P.M. _____
	TOTAL MILES		✓	NO. OF PERSONS		✓
	COST PER MILE	@				✓
	<b>TOTAL</b>	<b>\$</b>				

VEHICLE LICENSE NO. \_\_\_\_\_  
 VENDOR NUMBER \_\_\_\_\_  
 ACCOUNT NUMBER \_\_\_\_\_  
 ACCTS. PAY CONTROL NO. \_\_\_\_\_