PERSONNEL 03.1321 AP.2

## **Board Vehicle Request**

	Date:
Employee Name:	
Team/Group:	
Γ	Trip Details
Destination:	
Mileage:	
	Check-out Time:
Vehicle Check-in Date:	Check-in Time:
Number of Staff:	
Number of Students:	
☐ I have completed and attached the Motor Vehic Transportation Department.	le Records Check and 03.1321 AP.22 are on file with the OCBE
Employee Signature	Date
☐ Approved ☐ Not Approved Reason:	
Principal or Department Head Signature	
Chec	sportation Department after Motor Vehicle Record ck is completed.  first-serve basis. Availability is not guaranteed.
requesis are gramea on a just-come,	Review/Revised: