

Approved _____
Date _____

**Dalton State College
Vehicle Reservation Form**

Employee Requesting: _____

Employee Driving: _____

Number of Passengers: _____
(Including Driver)

Destinatino/Purpose: _____

Departure Date: _____

Departure Time: _____

Return Date: _____

Return Time: _____

Signature: _____ Date: _____

PLEASE MAKE COPIES OF THIS FORM FOR YOUR FILE.

**ALL RESERVATIONS WITH STUDENT DRIVERS MUST FURNISH A
COPY OF VALID DRIVERS LICENSE BEFORE APPROVAL.**

NO PERSONAL USAGE OF ANY STATE VEHICLE.