Rancho Santiago Community College District  
Santiago Canyon College  
REQUEST FOR USE OF DISTRICT/COLLEGE and/or RENTAL VEHICLE(S)

Please submit your completed and signed request to SCC Administrative Services office at least two (2) weeks in advance. Priority for reserving District vehicles is for programs and activities directly related to instruction, athletics and student services. Requests are accepted for the current semester only.

**PASSENGERS:** NO ONE OTHER THAN A CURRENT ENROLLED RSCCD STUDENT OR STAFF MEMBER IS ALLOWED IN A DISTRICT OWNED OR RENTED VEHICLE.

**DRIVERS:** ONLY DRIVERS WHO ARE LISTED ON THE DISTRICT’S APPROVED DMV PULL PROGRAM ARE ALLOWED TO DRIVE A DISTRICT OWNED OR RENTED VEHICLE (DRIVERS MUST BE OVER 21 TO DRIVE RENTAL VEHICLES). NO EXCEPTIONS. VIOLATING DISTRICT PROCEDURES IS SUBJECT TO DISCIPLINE.

**PASSENGER LIMIT: 7 PLUS DRIVER (8 MAX)**

TODAY’S DATE: ____________________________

REQUESTED BY: ________________________________________  EXT: ____________________________

(Authorized District Employee)

EVENT OR SPORT: ____________________________________________  DEPT: ____________________________

**DATE OF TRIP:** _______________  _______________  _______________

**TIME:** DEPART: _______________  am/pm  RETURN: _______________  am/pm

**DESTINATION:** ____________________________________________

**ADDITIONAL DATES, TIMES AND DESTINATIONS SHOULD BE LISTED ON AN ATTACHED “VEHICLE REQUEST FORM—PART II”

# PASSENGERS – INCLUDING DRIVER(S): _______________  # VEHICLES REQUESTED: _______________

DRIVER INFORMATION:

_________________  ___________________  ___________________
______  ________  ________

Driver’s Name  Valid Calif. Operator’s License No.  Exp. Date

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➢ Only RSCCD AUTHORIZED and APPROVED employees or student drivers are allowed to drive district or rental vehicles.
➢ If you have additional drivers, please include the necessary information on a separate sheet and attach to this form.

ADMINISTRATIVE APPROVAL: ____________________________  DATE: ____________________________

Dean or Administrator Signature

APPROVED COPY OF THIS FORM WILL BE SENT TO DEPARTMENT ADMINISTRATOR/SUPERVISOR AND REQUESTOR ONCE REQUEST IS CONFIRMED BY SCC-ADMINISTRATIVE SERVICES OFFICE

OFFICE USE ONLY:

NUMBER VEHICLES RESERVED:  DISTRICT _____ [AND/OR]  RENTAL _____

RESERVATION(S) CONFIRMED BY: ____________________________  DATE: ____________________________

NOTIFICATION SENT TO DEPARTMENT BY: ____________________________  DATE: ____________________________