## STATE CENTER COMMUNITY COLLEGE DISTRICT

## **AUTHORIZATION FOR USE OF PRIVATE VEHICLE FOR SCHOOL TRANSPORTATION**

## PRIOR TO TRIP: Submit to College Business Manager/Vice Chancellor, External Operations

	Fresno City College	□ Reedley College	☐ Madera Center	□ Oakhurst Center
	Clovis Center	☐ Community Campus	□ District Office	
I.	INFORMATION ON Vehicle 1 Make or Model:	VEHICLES	Vehicle License #:	
	Vehicle 2 Make or Model:		Vehicle License #:	
	Vehicle 3 Make or Model:		Vehicle License #:	
	Registered Owner: _			
	Address of Registered Owner:			
	Name of Driver:		Driver's License #:	
	Name of Insurance C	ompany:		
	Type of Insurance: (Check as applicable)			
	Public Liability	Property Damage	Medical Coverage _	Collision
II.	INFORMATION ON	TRIP		
	Date of Trip:	Destination:		
	Purpose of Trip:			
	Number of Passenger			
III.	AUTHORIZATIONS	<u>S</u>		
	1. Requested by:			
	2. Authorized by:			
	3. Unit Manager:			
	1	Manager/Vice Chancellor, E		

White copy: College Business Manager Yellow copy: Vice Chancellor, External Operations Pink copy: Unit Office