

## CTE VEHICLE REQUEST FORM

2023-2024

Please return both pages of this form to [ctetransportation@fresnounified.org](mailto:ctetransportation@fresnounified.org) at least 4-6 weeks prior to date of proposed trip.

### General Information

Proposed Date of Trip: \_\_\_\_\_

Requesting Staff Member: \_\_\_\_\_ School/Site: \_\_\_\_\_

Class, Group, Pathway, Academy, Club, etc.: \_\_\_\_\_

Total Passengers: \_\_\_\_\_ Number of Vehicles: \_\_\_\_\_  
*Includes students and staff* *Based on total passengers; SUV holds max 8*

### Trip Information:

Name of Destination: \_\_\_\_\_

Destination Address: \_\_\_\_\_

#### Purpose/Outcomes of Trip:

#### Comments/Additional Information:

### For Office Use Only:

Date Received by CCR: \_\_\_\_\_ Funding Source: \_\_\_\_\_

Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Object/Activity: \_\_\_\_\_

## **Driver Information**

Fresno Unified's Board policy requires **at least two** (2) Fresno Unified employees with valid driver's licenses to be in the vehicle at all times if the trip a) includes Fresno Unified students, and b) is outside of Fresno city limits.

**Primary Driver:** \_\_\_\_\_ **Employee ID:** \_\_\_\_\_

**Alternate Driver:** \_\_\_\_\_ **Employee ID:** \_\_\_\_\_

**Alternate Driver:** \_\_\_\_\_ **Employee ID:** \_\_\_\_\_

**Alternate Driver:** \_\_\_\_\_ **Employee ID:** \_\_\_\_\_