



Transport Request Form

PART 1

Name Date/...../.....

Faculty, Department, Section Designation

Purpose of Trip
.....
.....

Anticipated Number of Passengers Type of Vehicle/Capacity

Date & Time of Departure/...../..... : Destination

Return Date/...../..... Signature Date/...../..... Mobile Phone

Directorate/ Division/ Section

PART 2 (REGISTRAR'S COMMENTS)

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PART 3 (TRANSPORT OFFICER)

Transport Available/Not Available Driver's Name.....

Vehicle Reg. No..... Estimated KM Estimated Cost.....

Signature Date/...../.....

PART 4 (FINANCE DEPARTMENT)

Funds available (attached budget)

NOTE: The Transport Request Form **MUST** be brought to the Transport Office 3 Days in advance for reservation. No University Vehicle should leave the University without the Transport Request Form (TRF) approved by the Registrar or His/her representative