

The Request Number shown below must be on your "Statement of Travel Expense"



Application for Rental of Vehicle for College Travel

(Applicants are subject to provisions of Del Mar College Policy 3.8 General Administration)

Use Requested by:	Driver's License No.:	Exp. Date:	Budget account number to be charged:
Destination(s):	Dates of Conference/Activities:		
	From:	To:	
Purpose of Trip:			
At point of destination(s), I may be contacted via:			
Name(s) of other passengers: (Please list names alphabetically. Note as "Driver" (including Driver's License No.) anyone besides applicant who will driving this vehicle).			

CAR TYPE REQUESTED

RENTAL DETAIL

SIZE (EXAMPLE)	Date	Time	AM/PM	Airline/Flights
Compact (Nissan Versa/Toyota Yaris) Midsize (Cobalt/Sentra/Corolla) Full-size (Impala/Altima/Charger) Mini Van (Caravan/Toyota Sienna) PU Truck (Silverado/Ford F150) SUV (Acadia/Journey/Tahoe/Expedition) Other	Pick-up			
	Return			
Do you intend to leave your personal vehicle?	Location	Address	Hours	Phone #
	SPID-South	6249 SPID	M-F 7:30 – 6 Sat 9-12	851-8600
	SPID-North	3005 SPID	M-F 7:30 – 6 Sat 9-12	851-2212
	Everhart	4601 Everhart Rd.	M-F 7:30 – 6	993-7990
	Downtown	823 N. Water	M-F 7:30 – 6 Sat 9-12	884-7368
	Airport	1000 International Blvd.	Sun-F 7:30-11:59 p.m. Sat 7:30-10	299-1234
Do you intend to use the after hours drop box: (Circle one)	WOW	6721 Weber Rd.	M-F 8 – 5:30	854-0580

COLLEGE POLICIES GOVERNING USE OF RENTAL VEHICLES USED ON DIRECT BILLING PROGRAM

1. The Vehicle is to be used only for College Business. Any driver cannot have had a citation in the previous five years for DWI or DUI.
2. Only Del Mar College Employees or Student may be transported in vehicle.
3. Any Driver **MUST** be over 21 years of age. **MUST** be a college employee; and **MUST** be on the application as "Driver".
4. All terms of the Enterprise Car Rental Agreement **MUST** be followed.
5. If any governing policies (attached) are violated, the employee becomes personally responsible for all liabilities relating to the rental of the vehicle.

Department:	Phone:	Fax:
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I _____, agree to abide by all College Policies and the terms of the Enterprise Rental Agreement.
 (Applicant's Name, Printed)

Applicant's Signature _____ Date _____

Approved by: _____ Date _____
 Chairperson/Supervisor/Director

Check Box and initial
 if your leave request
 has been approved

 initials

TO BE COMPLETED BY PURCHASING DEPARTMENT

Request Number:	Date Application Received:	Time received:	Received by:
Reservation Type:	New Reservation	Existing reservation change	Cancellation
Confirmation Number:			

Approved
 Disapproved

David Davila, Director

_____ Date

Distribution: Confirmation by Enterprise Rent-A-Car or Avis to Purchasing Department