

Southern University at Shreveport

Short-term Vehicle Check-out Form

Date: _____ Approved by: _____

Destination: _____

Driver: _____

CHECK-OUT

Vehicle Assigned (Make/Model) _____

Date requested: _____ Time: _____

Released by (Officer) _____ Date: _____ Time: _____

CHECK-IN

Received by (Officer) _____ Date: _____ Time: _____

Comments: _____
