

Motor Pool Vehicle and Van  
Request Form

**Troup County School System  
Transportation Department**  
100 North Davis Road  
LaGrange, GA 30241  
Phone: (706) 812-7935  
Fax: (706) 812-7937

**PLEASE use this form when the requestor will not require an assigned bus driver.**  
**It is the responsibility of the person making the request to verify with the Transportation Department that the request has been received and approved.**

Vehicle Requested	
Requested by	
Department/School	
<b>Required: Call Back Phone Number of Person Responsible in Case of Availability Issues</b>	
Destination	
Departure Date	
Estimated Departure Time	
Estimated Return Date	
Estimated Return Time	
Purpose of Use	
Special Conditions/Equipment Needed	
Number of Riders	
Driver's Name	

Approved by: \_\_\_\_\_  
Department Head/Principal

\*\* Transportation Director's Approval: \_\_\_\_\_

PLEASE give at least 3 days notice for use of vehicle. If the vehicle is not available we will notify you of other options.

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**Motor Pool Use Only**

Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_

Vehicle Assigned other than Requested: \_\_\_\_\_

Revised on 11/14/11