

Brownsville Independent School District Vehicle Rental Reservation Request

Form must be submitted with approved Professional Leave Form approved by the Superintendent

Sponsor Name: _____ Phone: _____
 Driver's Name: _____ Campus: _____
(If different from Sponsor)

Motor Vehicle Record Check

As of January 2008, any person renting a vehicle must obtain a **Motor Vehicle Record Check** by contacting Ms. Judy Cuellar in the Personnel Department. Clearance from Human Resources must accompany the reservation request. Allow a minimum of two weeks for approval.

Purpose of Trip: _____
 Destination: _____
 Departure Location (s): _____
 Departure Date: _____ Departure Time: _____
 Return Date: _____ Return Time: _____
 Hotel: _____

 Phone: _____
 Arrival Date: _____
 Departure Date: _____
(if different from above dates)

Comments: _____

Student Travel List IMPORTANT

Please provide telephone or cell phone number for emergency contact for each student.

	Student Name	Student ID #	Emergency Contact Name	Emergency Contact Phone #
1				
2				
3				
4				
5				
6				
7				
8				
9				
1				

Attach additional list if necessary.