

SOUTH EASTERN UNIVERSITY OF SRI LANKA

VEHICLE REQUISITION FORM FOR INTERNAL RUNNING

This form should be handed over to the General Administration Branch **one day before** the journey

01. Name :
(Student Registration No)

02. Designation: 03. Dept.:

04. Purpose of Traveling:

05. Name/s of person/s traveling:
.....
.....
.....

06. Proposed itinerary: from:..... to:

07. Time of Departure: from:..... expected time to return:

08. Date on which the reservation of vehicle required:

Date:.....
Signature of Applicant

Recommended / Not recommended

Head of the Dept./Division

(For transport Division Use)

Vehicle no: Driver Name:.....

Date : Approved/Not Approved

Senior Asst. Registrar/Administration

(for drivers Use)

01. Name:..... Vehicle No:

02. Place Visited: Final Mileage:.....

03. Report, If any damages / defects,
.....
.....
.....

(To be returned by Driver to Senior Asst. Registrar / Admin. after completion)

Signature of Driver:..... Certified by:.....

Date : Date :