

H8.1 Appendix 1: Transport Requisition Form

MOI UNIVERSITY

TR NO. 00000

DOC. NO. MU/ADM/TRA/OP/001

TO BE FILLED IN TRIPLICATE 14 DAYS IN ADVANCE

FROM: SCHOOL/DEPARTMENT: .....

TO: TRANSPORT & GARAGE MANAGER.

**A) USER REQUISITION DETAILS**

Please facilitate the following transport requirement

Date of travel (DOT) ..... Time of Departure ( TOD).....

Date of Return (DOR) ..... Time of return (TOR) .....

Destination 1.....2.....3.....4.....

Estimate Distance 1 .....2.....3.....4.....

Total number of kilometers (return).....

Nature & purpose of journey  
.....  
.....

Type of vehicle requested:..... No. of Passenger on Trip .....

- (i) Bus  (ii) Mini bus  (iii) Van  (iv) Others

Requisition Officer .....designation.....Date.....

TELEPHONE NO: .....

Head of Department Sign &Stamp.....

Terms of payment; Cash  Cheque  Amount Budgeted .....

Amount Approved/Paid..... Vote charged .....

**B) TRANSPORT OFFICE ( official use only)**

Vehicle Available es  No Sign ..... Date.....  
**TRANSPORT OFFICE - ATO, TS**

Registration No.....Driver(s) Name(s).....

Assigned By.....Sign.....Date.....  
**TRANSPORT OFFICER**

**C) APPROVAL**

Approved/Not Approved.....Date.....  
If not approved give reasons:

**TRANSPORT & GARAGE MANAGER**

Note: For long distances trips, a Mechanic shall accompany the vehicles in the convoy.