

SWINBURNE UNIVERSITY OF TECHNOLOGY
Facilities and Services Group, Hawthorn Campus - Mail P 15

**APPLICATION FOR USE OF UNIVERSITY POOL
VEHICLE OVERNIGHT - HAWTHORN CAMPUS**

Note: This form is to be completed by university staff requiring the use of a Hawthorn pool vehicle(s) overnight.

Higher Education TAFE (Please tick appropriate box)

Name of Driver: _____

Department: _____ Licence No: _____

Phone: (Work): _____ (Mobile): _____ (Home): _____

Date of Departure: ____/____/____ Time: _____ am/pm

Date of Return: ____/____/____ Time: _____ am/pm

Destination/s: _____

Number of people that will be in the vehicle: _____

Vehicle Required (please tick):

Sedan Station wagon Mini-bus (12 seater - including driver)

Reason(s) for extended use of vehicle: _____

Signed: _____
Signature of Driver

Date: ____/____/____

Signed: _____
Signature of Department/School

Date: ____/____/____

Signed: _____
Signature of Campus Manager (TAFE only)

Date: ____/____/____

**FACILITIES AND SERVICES GROUP
Hawthorn Campus
Office Use Only**

Driver's Licence sighted

Signatories correct

Approved: _____

Date: ____/____/____

Security informed via e-mail