



PASSENGER ROSTER

Vehicle Assigned: _____
(from "Use of Vehicle Form")

License Number: _____
(from "Use of Vehicle Form")

Driver's Name: _____

Date of Departure: _____ Departure Time: _____

Date of Return: _____ Return time: _____

Cell phone/emergency number: _____

Names of all passengers:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**THIS ROSTER MUST BE COMPLETED AND SUBMITTED TO
UNIVERSITY POLICE BEFORE TRAVELING**

Note: If there are changes to the passenger list after it has been turned into University Police,
please submit a revised roster to U.P.D.

5/1/2011

