

**Davidson County Community College**  
**Authorization for Student Travel in Personal Vehicles**

(Complete and return to the Director of Student Life and Leadership five business days prior to travel)

Name of Student Driving: \_\_\_\_\_

Student ID #: \_\_\_\_\_

Local Address & Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Address & Phone Number: \_\_\_\_\_

The following item(s) are required:

\_\_\_\_\_ Valid Driver's License (State & Number): \_\_\_\_\_

\_\_\_\_\_ Personal Vehicle Insurance Card (Insurance Co. & Policy #): \_\_\_\_\_

\_\_\_\_\_ Current State Inspection on vehicle being driven: \_\_\_\_\_

\_\_\_\_\_ Model, Make, and Year & Color of Vehicle being driven: \_\_\_\_\_

\_\_\_\_\_ License Plate Number (State & Number): \_\_\_\_\_

Activity Attending: \_\_\_\_\_

Date and Time of Departure: \_\_\_\_\_

Date and estimated time of arrival at destination: \_\_\_\_\_

Name of Hotel/Motel: \_\_\_\_\_

Address: \_\_\_\_\_

Address and phone number, if other than above, where you may be reached, including Cellular phone numbers: \_\_\_\_\_

Date and time of departure from activity: \_\_\_\_\_

Date and estimated time of arrival back: \_\_\_\_\_

\_\_\_\_\_ I have completed and signed the Field Trip Participation form.

\_\_\_\_\_ I have reviewed this form and agree to abide by the rules of good behavior while attending off-campus activities.

Any student who fails to adhere to the current Code of Student Conduct and College Procedures while participating in on or off-campus activities is subject to disciplinary Action.

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Signature

Date

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Director of Student Life and Leadership

Date