



Khawaja Fareed University of Engineering & Information Technology
Rahim Yar Khan

Vehicle Requisition Form

Name	
Designation	
Department	
Date of Visit	
Time of Visit	
Place of Visit	
Purpose of Visit	
Expected Time of Return	
Type of Vehicle Used	
Name & Signature of Requestor	
Concerned Department HOD Recommendation (Name & Signature of HOD)	

For use of Transport Office only

Recommended	Not Recommended

Program Officer / Transport Officer