

**WSU TRAVEL REQUEST**  
**ADDITIONAL DRIVER(S)**

Attachment to Travel Request for following date(s): \_\_\_\_\_  
(date(s))

Originator's name: \_\_\_\_\_

for vehicle(s) number: \_\_\_\_\_

**I HEREBY ACCEPT RESPONSIBILITY FOR THE USE OF THE STATE VEHICLE. ALL DRIVERS MUST HAVE A VALID U.S. DRIVER'S LICENSE.**

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Sign & print name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Driver)

**I HEREBY ACCEPT RESPONSIBILITY FOR THE USE OF THE STATE VEHICLE. ALL DRIVERS MUST HAVE A VALID U.S. DRIVER'S LICENSE.**

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Sign & print name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Driver)

**I HEREBY ACCEPT RESPONSIBILITY FOR THE USE OF THE STATE VEHICLE. ALL DRIVERS MUST HAVE A VALID U.S. DRIVER'S LICENSE.**

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Sign & print name: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Driver)

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(Driver)