

**UNIVERSITY OF NAIROBI**  
**TRANSPORT APPLICATION FORM**

NOTE: Application forms for transport must be submitted in duplicate and should reach the Transport office at least 5 days before the departure date. The trip shall take place only, after approval and issuance of a permit by the transport office.

**PART 1: TO BE COMPLETED BY THE APPLICANT:**

NAME: \_\_\_\_\_ DESIGNATION: \_\_\_\_\_

DEPARTMENT/FACULTY/INSTITUTE: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

NATURE OF TRIP: Academic/Association/Funeral/Others (Specify) \_\_\_\_\_

Number of Passenger seats required: \_\_\_\_\_

DETAILS OF TRIP From: \_\_\_\_\_ To: \_\_\_\_\_

Departure Date: \_\_\_\_\_ Departure Time: \_\_\_\_\_

Return Date: \_\_\_\_\_ Return Time: \_\_\_\_\_

**INDICATE FUNDS REQUIRED FOR THE TRIP AND APPROVING UNIT:**

Fuel Cost KShs: \_\_\_\_\_ \*College/Department/Faculty/Institute/Central Administration

Drivers Allowance KShs: \_\_\_\_\_ \*College/Department/Faculty/Institute/Central Administration

Students/Staff Allowance KShs: \_\_\_\_\_ \*College/Department/Faculty/Institute/Central Administration

Bus/Minibus/Others: \_\_\_\_\_ \* College/Department/Faculty/Institute/Central Administration

**PART II: TO BE COMPLETED BY HEAD OF DEPARTMENT/FACULTY**

\*I recommend/do not recommend that the transport request by the above named be approved

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART III: TO BE COMPLETED BY THE COLLEGE PRINCIPAL**

\* I recommend/do not recommend that the transport request by the above named be approved

Bus/Mini-bus/Others assigned to the trips: Reg. No. \_\_\_\_\_ Name of Driver: \_\_\_\_\_

College Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART IV: TO BE COMPLETED BY CENTRAL TRANSPORT OFFICE**

All details for the trip have been/have not been provided.

The vehicle assigned to students/staff is in Satisfactory/Unsatisfactory condition.

Sitting capacity is adequate/not adequate.

Approval for the trip is recommended/not recommended.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART V: APPROVAL BY THE DEPUTY VICE-CHANCELLOR/VICE-CHANCELLOR**

The request for transport is approved/not approved.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Delete whichever is not applicable,

Attach AIE form

Attach Details of the trip