

DEPARTMENT OF CHILDREN AND FAMILY SERVICES
USE OF PERSONAL OR OTHER NON-STATE VEHICLE FORM

I, _____, understand that travel may be required in the course and scope of my employment, and that the availability of a state vehicle cannot be guaranteed.

Because of this, I may be required to use a personal or other non-state vehicle in the performance of my job duties, and must have access to such vehicle. [DCFS Travel Regulations \(Policy 1-14\)](#) cover reimbursements for use of personal vehicles.

I understand the above and will comply with the requirements.

Signed: _____

Dated: _____