

TRANSPORTATION REQUEST

Date: _____

Person making request _____

Organization _____

Date of Trip _____

Number of Students _____

Destination _____

Bus _____ Van _____ Car _____ Suburban _____

Departure Time _____ Return Time _____

Brief Description of Trip _____

Signature of Sponsor Making Request _____

Signature of Administrator (this does not ensure your vehicle, just for site approval)

After Administrator signs Request Please Deliver to Transportation Director

Signature of Transportation Director _____

OFFICE USE

Bus Driver _____

Date Bus Driver was Assigned Trip _____

Confirm Date with Sponsor _____

Activity Paid by _____

Signature of Transportation Director _____ Date _____

***Transportation Director will place back into box of the requesting party
Request need to be made at least one week in advance. Return vehicle clean and fueled. All fuel
receipts are to be turned in to transportation director. Report any probles to same.***