

Field Trip / School Vehicle Request

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**Submit form to Transportation Department at least 3 weeks in advance of trip**

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**Section 1 - Complete and submit directly to the Transportation Department**

Destination: \_\_\_\_\_

Date(s) of trip: \_\_\_\_\_

Purpose of trip: \_\_\_\_\_

Type of Trip:

Grade(s)/Club/Group: \_\_\_\_\_ # of Students: \_\_\_\_\_ # of Adults: \_\_\_\_\_

Departure - Location: \_\_\_\_\_ Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

Requested by: \_\_\_\_\_ Date of Request: \_\_\_\_\_

**Section 2 - Completed by Transportation Department**

Transportation is (circle one): Available / Not Available Date: \_\_\_\_\_

Name of Driver Assigned: \_\_\_\_\_

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**Section 3 - Completed by Administration**

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

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

Original: Transportation

Copy: Business Office  
Requestor