LOWNDES COUNTY PUBLIC SCHOOLS HAYNEVILLE, ALABAMA 36040

TRANSPORTATION REQUEST FORM

Completed by Finance Dept.
Date Received
Check No

School/Organization		Date of Request			
Name(s) of Person(s) Making Reque	est				
Name(s) of Faculty/Staff Attending	Field Trip				
Number of Buses Needed	Number of Students	of StudentsNumber of Teachers		ers Number of Chaperone	
Date of Field Trip	Departure	Time		Return Time	
Destination	Physical a	ddress			
Educational Objective(s)					
Follow-up Activity/Activities in Cla	ssroom				
Funding Source					
*Fee Assessed					
Check OneAthletic/Band/RO	ΓCField Trip	s or Other P	rograms (i	i.e., 21st Century)	
Estimated Bus Driver Fee	:hours x	\$19.25/hr.	=	\$	
Estimated Mileage Fee: _	x \$1.75	per mile	=	\$	
Outside Agency Fee:	x \$2.00 j	per mile	=	\$	
Estimated Total Cost of T	rip		=	\$	
Exact employee work time and mil	leage will be reported by t	he driver an	ıd your inv	voice will be based on this information.	
Approval of Principal/Director				Date	
Approval of Student Services Direct	or			Date	
Approval of Superintendent				Date ********	
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Driver(s) Assigned		Vehicle	(s) Assigned	d	
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Please give car	feteria manager a copy of	•		ral from Superintendent.	
Date of Field Trip	Departure Time		Mana	ger Signature:	
Do sack lunches need to be prepared	for this trip? YES	NO If ye	s number of	f students to prepare lunches for	

Please Note: Approval of this request is contingent upon the payment of past assessed fee. Once approved or denied, you will receive a faxed copy or photo copy. Student Services: 334 548 2131 *** Fax: 334 548 2161 *** Office of Transportation Foreman: 334 548 5060.

*The payment should be in check form made to the Lowndes County Board of Education and submitted to the Department of Transportation.