

REQUEST FOR EXTRA TRANSPORTATION
(For STATE SCHOOL BUS Use Only)
*** MUST BE CURRICULUM RELATED TRIPS ***

School submitting request _____ Date _____

School/Group responsible for payment _____

Educational Purpose/Destination Point(s)

Teacher's Signature _____

Date of Trip _____ Number of School Buses Needed _____

School bus number(s) requested and assigned driver's name(s)

Bus No. _____ Driver: _____

Bus No. _____ Driver _____

Bus No. _____ Driver _____

(For school bus extra use, driver must be paid from state funds.)

Number of Students _____ Number of Teachers _____

Departure Point _____

Departure Time _____ AM / PM Return Time _____ AM / PM

General Route

Destination Point(s) _____
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Principal's Signature _____

_____ Date

Transportation Director's Signature _____

_____ Date

This form is required to be pre-approved by principal and director each time a yellow school bus leaves the school for extra use transportation. After the trip, complete the Bus Driver's Report and forward it with a "school check" to the Transportation Office. Refer to Trip Requisition Number, the red number in the upper right corner of this form, when making school bus extra use payments.