

Ortonville Public Schools Transportation Request Form

Date of Trip: _____

Activity/Group: _____

Destination: _____ Door # _____

of Riders: _____ Date Submitted: _____

Person in Charge: _____

Depart Time Estimate: Return Time Estimate:

Charge To: _____

Food Service needs notification for student meals missed. Check those that apply:

Breakfast Lunch

Comments:

Requested By: _____

Approved By: _____

Driver: _____

Vehicle/Bus #: _____

Departure Information

Return Information

From: _____

To: _____

Time:

Time:

Driver Hours:

Odometer End:

Odometer Begin:

Activity Miles:

Please submit form to Transportation Supervisors mailbox located in the K-12 Office. Approval must be granted prior to your departure. No handwritten forms will be accepted.