

Burbank Unified School District
BUS REQUEST FORM
(To be completed by teacher in charge)

School: _____ Date _____

School Address: _____

School Phone: _____
(Number to be called in case of emergency during field trip-list a number which will be answered)

Teacher(s) in charge: _____

Class, Club, or Group: _____

Grade level: _____ Total No. of Pupils: _____ Total No. of Adults: _____

Charge transportation to Budget Appropriation No.: _____

Day(s) & Date(s) of Trip: _____

Destination: _____

Address: _____ Phone No. _____

Time bus should arrive at school _____ A.M. _____ P.M. _____

Exact location for bus pick up: _____
(Example: flag pole, west parking lot, auditorium, etc.)

Time you must arrive at your first destination: _____

List location and arrival time for any other stops, including lunch _____

Time to depart from last location: _____

Time to return to school: _____

REQUIRED SIGNATURES:

All persons making the field trip or excursion shall be deemed to have waived all claims against the District or the State of California for injury, accident, illness, or death occurring during or by reason of the field trip or excursion.

I acknowledge that I have read, understand, and agree to follow all provisions of Board Policy 6014 and Accompanying Administrative Regulations. If a bus is used, I have provided instruction concerning the bus safety evacuation procedures prior to this trip or plan to provide such instruction prior to the commencement of the trip, as required by TITLE 5, Section 14255.

Teacher: _____ Date: _____

Principal: _____ Date: _____

Superintendent (if applicable): _____ Date: _____

Note: This completed pink copy (Form A1) and completed pink copy of Form A (Field Trip Approval Form), with required signatures, must be forwarded to Media Services. A copy of the Bus Request Form (goldenrod) will be returned to you after processing.

FOR MEDIA SERVICES USE ONLY	Date received _____	Date Processed _____
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Distribution: White-School, Pink-Media Services (approved copy only)