



ADMINISTRATIVE REGULATION EXHIBIT

E 6153 (F)

FIELD TRIP BUS REQUEST

School	Requestor	Date of Request
Number of Passengers	Team/Grade	Date of Trip
Leave from: _____ (School Site)		Departure Time
Destination: _____ (Address)		Desired Arrival Time
Leave from: _____		Departure Time
Return to: _____ (School Site)		Expected Arrival Time
<input type="checkbox"/> Meal Stop Requested _____ (Meal Stop Location)		
Special Needs: _____ (Equipment Storage, etc.)		

Administrator Approval

Budget Account

TRANSPORTATION DEPARTMENT ACKNOWLEDGEMENT OF FIELD TRIP

<input type="checkbox"/>	<input type="checkbox"/>	OR	_____	_____	_____
Approved as Requested	District Bus		Charter Bus Company	No. of Buses	P.O. Number
_____ Miles x \$ _____ = _____			Hours x \$ _____ = _____		
Total Cost: \$ _____					

Dispatcher Signature

Date

FOR TRANSPORTATION DEPARTMENT USE ONLY

Bus No.	Start Time
Driver Name	Arrival Time at School
Student Count	Departure Time from School
Adult Count	Arrival Time at Destination
TOTAL PASSENGER COUNT	Departure Time from Destination
Ending Mileage	Arrival Time at School
Starting Mileage	End Time
TOTAL MILEAGE	TOTAL HOURS

Dispatcher Signature

Date

District Office