

**Washington County Board of Education
P. O. Box 1359 / 229 Granade Avenue
Chatom, AL 36518**

Athletics and Band Travel Request Form

*Circle One: Football, Volleyball, Basketball, Softball, Baseball, Golf, Track, Band, Soccer

**Circle Two: Varsity, JV, Boys, Girls, Boys and Girls, Cheerleaders

1. *The school nurse should sign and date this travel request at least two weeks prior to travel.*

Nurse _____ Date _____

2. Mileage is calculated based on www.mapquest.com

3. Mileage is calculated for round trip at \$1.60 per mile per bus.

4. Total the mileage and expense in the bottom blank.

5. Attach the Extracurricular Bus Driver Payroll Form to this request form.

6. Number of buses requested for trip? _____

Coach _____ School _____

DATE	OPPONENT	TOWN/COMMUNITY	TOTAL MILEAGE	EXPENSE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
Total	*****	*****		

Principal _____

Date _____

Transportation Supervisor _____

Date _____

Approved () Denied () Superintendent _____

Date _____