SERIES 700 SUPPORT SERVICES

Operating District Owned Vehicles

TRANSPORTATION VAN REQUEST FORM

CODE: 751.5R-2

(Please Print Legibly)

This request form should be completed in its entirety by the professional employee in charge. Please remember that parental permission slips are required for all participating students. When requesting a bus, an Educational Field Trip request form must be approved prior to submitting a Transportation Van Request Form.

Requests are due at least two	weeks prior to	date of scheduled trip.	
Date of Trip		Day of Week	
(Submit a separate	request for each	n trip)	
Destination			
Group, Class, Sport or Activity Requiring Transportation			
Professional Employee Respons	sible		
Professional Employee who wi	ll be Driving Va	an	
Professional Employee Respons	sible Contact C	ell# for the day of Field Trip	
			A.M
Total Number of People Involv	ed	Time of Departure	P.M.
Number of Vans Needed		Expected Time of return to school	A.M P.M
Purpose of Trip (Explain briefly			
submitted with building approv will be released. Driving the Van	al signatures to	will only be held for 48 hours. You <u>must</u> have the Transportation Department within the 48 s will be provided) and park the vans in the se	hours or the vans
If requesting Van, please list S	Students Invol	ved and Driver of Van	
1		5	
2		6	
3		7. Van Driver	
4			
Person Requesting Approval	Date		
Approved		Approved	
Principal / Supervisor	Date	Transportation Supervisor	Date