

LOWNDES COUNTY PUBLIC SCHOOLS
HAYNEVILLE, ALABAMA 36040

Completed by Finance Dept.
Date Received _____
Check No. _____

TRANSPORTATION REQUEST FORM

School/Organization _____ Date of Request _____

Name(s) of Person(s) Making Request _____

Name(s) of Faculty/Staff Attending Field Trip _____

Number of Buses Needed _____ Number of Students _____ Number of Teachers _____ Number of Chaperone _____

Date of Field Trip _____ Departure Time _____ Return Time _____

Destination _____

Destination physical address _____

Educational Objective(s) _____

Follow-up Activity/Activities in Classroom _____

Funding Source _____

*Fee Assessed

Estimated Bus Driver Fee: _____ hours x \$9.25/hr. = \$ _____

Estimated Mileage Fee: _____ x \$1.20 per mile = \$ _____

Outside Agency Fee: _____ x \$2.00 per mile = \$ _____

Estimated Total Cost of Trip = \$ _____

Exact employee work time and mileage will be reported by the driver and your invoice will be based on this information.

Approval of Principal/Director _____ Date _____

Approval of Student Services Director _____ Date _____

Approval of Superintendent _____ Date _____

Assignment of Vehicle

Driver(s) Assigned _____ Vehicle(s) Assigned _____

Lunch Assignment

Please give cafeteria manager a copy of this form after approval from Superintendent.

Date of Field Trip _____ Departure Time _____ Manager Signature: _____

Do sack lunches need to be prepared for this trip? ___ YES ___ NO If yes number of students to prepare lunches for. _____

Please Note: Approval of this request is contingent upon the payment of past assessed fee. Once approved or denied, you will receive a faxed copy or photo copy. Student Services: 334-548-2131 *** Fax: 334-548-2161 *** Office of Transportation Foreman: 334548-5060.

*The payment should be in check form made to the Lowndes County Board of Education and submitted to the Chief Officer of Finance.