PLEASE PRINT

Chico Unified School District/Transportation Attn: Ken Gregory 2455 Carmichael Drive, Chico, California 95928 (530) 891-3097

BUS FIELD TRIP REQUEST

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BUS FIELD TRIP REQUEST

SUBMIT COMPLETED FORM AT LEAST 2 WEEKS IN ADVANCE	SUBMIT COMPLETED FORM AT LEAST 2 WEEKS IN ADVANCE
Requested Date	Requested Date
School of Trip	School of Trip
Destination	Destination
Purpose of Trip	Purpose of Trip
Specific Pick-up Location	Specific Pick-up Location
Number of Passengers (Max 78 K-2nd/Max 65 3rd+ per bus)	Number of Passengers (Max 78 K-2nd/Max 65 3rd+ per bus)
Number of Buses Requested 1 2 3 (circle one) Grades	Number of Buses Requested 1 2 3 (circle one) Grades
Need bus to stay with trip? YES NO Note: shuttles approved by Transp.	Need bus to stay with trip? YES NO Note: shuttles approved by Transp.
arrive at school Bus 1Bus 2	arrive at school Bus 1Bus 2
leave school * * allow 15 min. load time	leave school * * allow 15 min. load time
arrive at destination	arrive at destination
leave destination	leave destination
return to school	return to school
Dist. Acct. Code#	Dist. Acct. Code#
or (complete 26 digit account code - use object code 5720) NON DISTRICT: Billing Name/Address/Contact Person/Phone:	or (complete 26 digit account code - use object code 5720) NON DISTRICT: Billing Name/Address/Contact Person/Phone:
Requisitioner (person in charge of scheduling the trip) & Phone Number:	Requisitioner (person in charge of scheduling the trip) & Phone Number:
Name of the Adult Chaperon who will be Riding on the Bus & Phone Number:	Name of the Adult Chaperon who will be Riding on the Bus & Phone Number:
Date Submitted	Date Submitted
Signature of Principal/Designee/Management Representative	Signature of Principal/Designee/Management Representative
	ApprovedDenied
Signature of Transportation Staff Revised September 2016	Signature of Transportation Staff Revised September 2016