



# Turtle River School Division Out-Of-School Activities Request (Request for Bus Transportation)

Request should be submitted as soon as possible, but **no later than two weeks** in advance of the event for out of Division or within Division trip.

SCHOOL: \_\_\_\_\_ DATE: \_\_\_\_\_

(Submitted)

GRADE(S): \_\_\_\_\_ SUBJECT: \_\_\_\_\_

MODE OF TRANSPORTATION: \_\_\_\_\_ BUS DRIVER REQUIRED: YES  NO

BUS DRIVER: \_\_\_\_\_

NUMBER OF STUDENTS: \_\_\_\_\_ NUMBER OF CHAPERONES: \_\_\_\_\_

DESTINATION: \_\_\_\_\_ KMS. (RETURN) \_\_\_\_\_

DEPARTURE: DATE \_\_\_\_\_ TIME: \_\_\_\_\_

RETURN: DATE \_\_\_\_\_ TIME: \_\_\_\_\_

SUPERVISING STAFF: \_\_\_\_\_

PURPOSE OF TRIP:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW DOES THE TRIP RELATE TO THE SUBJECT AREA?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ITINERARY: (Must be attached for all field trips)

TEACHERS'S SIGNATURE: \_\_\_\_\_

### ACTIVITY AUTHORIZATION

PRINCIPAL'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please specify where the kilometers for this trip will be charged to.

School funds  School budget  Special Grants  School KM  
Provide GL Code \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

SUPERINTENDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### TRANSPORTATION AUTHORIZATION

TRANSPORTATION SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_