



## SOUTH FORK UNION SCHOOL DISTRICT TRANSPORTATION REQUEST

Today's Date \_\_\_\_\_

### **Requester - Trip Event: (Minimum of 2 week notice required)**

Requested by: \_\_\_\_\_ Date needed: \_\_\_\_\_

Type of activity: \_\_\_\_\_ Lunch provided by Cafeteria: Yes \_\_\_\_\_ No \_\_\_\_\_

Destination: \_\_\_\_\_

### **Requester - Times/Vehicle Type:**

Time of departure: \_\_\_\_\_ Required arrival time at destination: \_\_\_\_\_

Time departure from destination: \_\_\_\_\_ Required arrival back at school: \_\_\_\_\_

Number of students: \_\_\_\_\_ Number of adults: \_\_\_\_\_ Total # passengers: \_\_\_\_\_

Type of transportation:    Bus    Van    Car    Truck    Private Vehicle

Driver requested: \_\_\_\_\_ will furnish driver: \_\_\_\_\_

Additional stops required: Yes                  No                  Location of stop: \_\_\_\_\_

### **For MOT Use Only:**

Assigned to: \_\_\_\_\_ Date: \_\_\_\_\_

Vehicle used: \_\_\_\_\_

Beginning mileage: \_\_\_\_\_ Actual time of departure from campus: \_\_\_\_\_

Ending mileage: \_\_\_\_\_ Actual time of return to campus: \_\_\_\_\_

Miles traveled: \_\_\_\_\_ Standby time: \_\_\_\_\_

Drivers signature: \_\_\_\_\_

### **For District Office Use Only – Trip Authorization:**

**MOT Supervisor:**                  ☐ Approved                  ☐ Not Approved                  (initial): \_\_\_\_\_

Superintendent/Principal                  ☐ Approved                  ☐ Not Approved                  (initial): \_\_\_\_\_

***If denied must have approval from Superintendent/Principal to use own vehicle: Approval: \_\_\_\_\_***