Please follow field trip procedures (attached) for distribution of this form to the appropriate departments/individuals.	**Transportation Office** Plainedge Public Schools UFSD #18 APPLICATION FOR ALL SCHEDULED TRIPS	Trip Number D.O. Contractor

PART I - Completed by Person in charge and approved by Building Principal (or Director of Athletics if it is Sports related)

Date of Trip		Day of Week		
Length (how many hours do you plan to be on the trip)				
Type (indicate Field trip/Sports or Other. If Other, please specify)				
Destination (exact address)				
Depart from School	Time		Location	
Depart for School	Time		Location	
Arrive at School	Time		Location	
Purpose of Trip				
Number of Students		Number of Adults		
Special Instructions				
Mode of Payment	District (list budget code)		Students (specify amount)	
Requested by:			Date:	
Approved by:			Date:	

Part II Completed by Transportation Office

# of Buses needed		Type	
Name of Contractor		Phone	
Address			
Supervisor of Transportation approval			

Part III Completed by lead driver and Person in Charge of Trip. Return to Transportation Office by Noon on following day

Bus Number		Actual time of Departure	
		Actual time of return	
Mileage at Departure			
Mileage at Return		Total Miles	0
Returned to (location)			
Comments	Lead Driver:		Signature:
		0	Signature:

Part IV TRANSPORTATION USE ONLY

Date Received:		Account Charged	Estimate	Actual
Number		District		
		Sports		
		Other		