

# WASHAKIE COUNTY SCHOOL DISTRICT NO. 1

Business Office  
Phone: 347-9286

Transportation Phone: 347-2841  
Brad Feather

## REQUEST FOR TRANSPORTATION

**This form is to be completed 5 school days prior to date of activity.**

School: \_\_\_\_\_ Date Request Submitted: \_\_\_\_\_

Activity: \_\_\_\_\_

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

Total number making the trip--including driver and sponsor(s): \_\_\_\_\_

Number of buses needed: \_\_\_\_\_

Bus to leave from: \_\_\_\_\_ at: \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

Check days transportation I requested and bus will be in use:

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_

Friday \_\_\_\_\_ Saturday \_\_\_\_\_

Dates Bus will be in use: \_\_\_\_\_

Estimated return time: \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

Sponsor assigned: \_\_\_\_\_

**PLEASE CALL 3 DAYS IN ADVANCE OF TRIP TO CONFIRM YOUR REQUEST.**

Signature of Administrator or Activity Director: \_\_\_\_\_

No request will be considered without an administrator's or activity director's signature.