

Petaluma City Schools
200 Douglas Street
Petaluma CA 94952

REQUEST FOR TRANSPORTATION SERVICE

This form must be filled out and received within five school days after making the EMAIL RESERVATION. The Transportation Department cannot guarantee the reservations after the five days without this form completely filled out.

School: _____ Date request was filled out: _____

Destination: _____ # of Buses: _____ Charter: _____
(Office use only)

Date of trip: _____ Leaving time: _____ Return time: _____
(Time bus arrives to site) (Time cleared at site)

Reason for request: _____ Required instruction: _____ Other: _____

Explain the purpose of the trip: _____

List all stops planned during the trip: _____
(see details below #3)

Number of students: _____ Other: _____ Total: _____
(See details below #4)

Budget number to be charged: _____

Donating organization: _____
There must be a budget number or donating organization billing address on all requests. If not the request will be returned and may be denied.

Name of certificated employee(s) in charge: _____

Alert person name and phone #: _____
(See details below #5)

Requested by: _____ Date: _____
Signature of person in charge

Approved by: _____ Date: _____
Principal

Approved by: _____ Date: _____
Director of Transportation

PLEASE NOTE:

- 1) On all field trips, a first aid kit must be in the possession of the person in charge.
- 2) The Driver has authority over all passengers on the bus. The chaperone/teacher in charge is expected to assist the driver in maintaining good order of the students on the bus.
- 3) Deviation from the above itinerary is not permissible except in cases of an emergency.
- 4) When requesting transportation be sure to give the accurate TOTAL count of all passengers. Total allowed passengers for Elementary is (65), total allowed passengers for Secondary is (54).
- 5) School alert person, not on the field trip, who has details of the trip plus a roster of passengers who may be contacted by parent or District personnel in case of an emergency.

OFFICE USE ONLY:

Date received: _____

Date approval sent: _____