

# Bus Request

Student Transportation of America (503)668-8855 fax (503)668-6161

Date of Request \_\_\_\_\_

Please submit at least two weeks prior to trip. Limited numbers of buses are available on a first come – first served basis.  
(Especially important in April, May and June)

School \_\_\_\_\_ Requested by \_\_\_\_\_ No. of buses\* \_\_\_\_\_  
Requestor's Phone # \_\_\_\_\_

Date of trip \_\_\_\_\_ Destination \_\_\_\_\_ Purpose of trip \_\_\_\_\_

Name of Group \_\_\_\_\_ Grade Level(s) \_\_\_\_\_ No. Students \_\_\_\_\_ No. Adults \_\_\_\_\_

Point of Departure \_\_\_\_\_ Loading Time \_\_\_\_\_

The bus will wait at the destination \_\_\_\_\_ The bus us will drop off, leave, and return for pick-up \_\_\_\_\_

Load to Return Time \_\_\_\_\_ Arrival back at School Time \_\_\_\_\_

Special needs/requests \_\_\_\_\_

Funding Source (must check one source and complete this section or request will be rejected):

- General Fund Requisition No. \_\_\_\_\_ (Only required for year-long recurring trips.)
- Other Fund Name: \_\_\_\_\_ Budget Code \_\_\_\_\_
- Club Account (Bill to): \_\_\_\_\_ (no requisition or budget code required for club billing)  
Club Name \_\_\_\_\_

Name of chaperone/coach/teacher(s) riding bus \_\_\_\_\_

<b><u>SANDY HIGH SCHOOL USE ONLY</u></b>												
Substitute Request:	EB	1	2	3	4	5	6	7	8	All Day	None	(Circle whichever applies)
Students to be gone:	EB	1	2	3	4	5	6	7	8	All Day	None	(Circle whichever applies)

\*\*\*\*\*  
(Requests without Administrator approval will not be processed)

_____	_____	_____	_____
Staff Member	Date	Administrator Approval	Date
_____	_____	_____	_____
Department Head Approval	Date	STA Confirmation	Date

A list of names for those students transported on this trip must be maintained by the school building (not by STA) and be available at request before and during the trip. Do not let the lack of names delay your submitting this request to transportation.

\*72 passenger bus seats 48 people, two per seat; 81 passenger bus seats 54 people, two per seat.