

HATTIESBURG PUBLIC SCHOOL DISTRICT

ACTIVITY TRIP TRANSPORTATION REQUEST FORM

DATE: _____ SCHOOL/DEPARTMENT MAKING REQUEST _____

CLASS/ORGANIZATION _____ EMPLOYEE MAKING REQUEST _____

ATTACH PERTINENT INFORMATION SUCH AS DRAFTS OR PARENT NOTICES, INFORMATION BROCHURES, SKETCHES/DETAILED PLANS, ETC.

Description of Activity (Include educational objectives & evaluation criteria.)

Will this activity require a substitute teacher to assume your classroom responsibilities: Yes _____ No _____
 Potential Hazards/Emergency Safeguards (Include arrangements for bus unloading/loading & parking).

Number of students: _____ Number of Adults: _____ Site Contact Person/Phone No. _____

ITINERARY: Departure Date: _____ Time: _____ Return Date: _____ Time: _____

Details of Itinerary (Include approximate times of all stops for meals, breaks, activities, etc).

Will a Charter Bus be used: _____ Yes _____ No _____ If yes, Name of Bus Company _____

Telephone _____ Cost _____ Source of Funding _____

HPSD FUNDING: Budget Account#: _____ Activity Account _____

HPSD TRANSPORTATION REQUEST: (Check One)

_____ Bus w/Driver (No. of Buses needed: _____)
 _____ Bus wo/Driver
 _____ Passenger Van

 Employee Signature

 Administrator's Signature

PROCEDURES FOR REQUESTING APPROVAL FOR ACTIVITY TRIPS AND TRANSPORTATION

- 1 Secure Activity Trip/Transportation Request Form from the Department of Transportation.
- 2 Complete Activity Trip/Transportation Request Form and secure appropriate signatures.
- 3 Submit original and 1 copy to Dept. of Transportation **AT LEAST 2 WEEKS PRIOR TO THE TRIP.**
- 4 The Dept. of Transportation will (1) Schedule transportation based on availability of personnel/equipment;
 (2) Coordinate last-minute schedule conflicts based on district priorities; (3) Notify employee via the authorizing administrator of approval or denial of request with copies of form.

ACTIVITY TRIPS WILL NOT BE APPROVED AFTER THE LAST DAY OF THE JUNE 15TH PAYROLL OF EACH SCHOOL YEAR

TO BE COMPLETED BY THE DEPARTMENT OF TRANSPORTATION

Approved: _____ Not Approved: _____ Director's Signature _____

Comments: _____