

FY10 CCPS Field Trip # _____

CECIL COUNTY PUBLIC SCHOOLS FIELD TRIP REQUISITION

All requests for field trips must be submitted in writing to the Transportation Office at least (10) working days prior to the trip. Upon receipt of the written request, confirmation will be returned to the person or school requesting the service. All passengers utilizing buses are subject to the Cecil County Public Schools' Bus Safety Regulations.

THIS PORTION TO BE COMPLETED BY SCHOOL REQUESTING SERVICE

Date of trip: _____ School: _____ Request Date: _____

Requested by: _____ Event: _____

Destination: _____

Address: _____

Loading time: _____ Loading Point: _____ # of buses: _____

Loading time and point for return trip: _____

Estimated time of arrival back at school: _____

Number of pupils to be transported: _____ Number of adults to be transported: _____

Name of sponsor to accompany trip: _____

Approved by: _____ Principal **AND/OR** BOE Coordinator: _____

******Costs to be paid by: _____ School _____ BOE (Account #: _____) ******

THIS PORTION TO BE COMPLETED BY TRANSPORTATION OFFICE

Confirmed by _____ Date _____

Confirmed with

Contractor _____

THIS PORTION TO BE COMPLETED BY BUS DRIVER

ACTUAL MILEAGE

ACTUAL TRIP TIME

Yard Start _____

Leave Yard _____

Yard Finish _____

Arrive School _____

Contractor _____

Leave School _____

Address _____

Arrive Destination _____

Leave Destination _____

Driver _____

Arrive School _____

Bus Number _____

Arrive Yard _____

THIS PORTION TO BE COMPLETED BY CONTRACTOR AND SUBMITTED TO TRANS SERVICES WITHIN TWO WEEKS OF DATE OF TRIP

Total Driving Time _____ X _____ per hr. = \$ _____

Total Mileage _____ X _____ per mi. = \$ _____

Misc. Fees _____ = \$ _____

Total Cost of Trip _____ = \$ _____