

WELLSBORO AREA SCHOOL DISTRICT  
Field Trip Transportation Request Form

OVERNIGHT

1. Teacher: Melanie Berndtson School: WAHS

2. No. of Students: 20 Adults: 2 Class or Organization: Grand Canyon FFA

3. Date of Trip: 6/12-6/14 2018 Destination: FFA Activities Week, State College Total Miles: \_\_\_\_\_

4. Estimated departure time: 8:00 am Tuesday From: WAHS

5. Estimated return time (arrival in the district): 3:00 PM Thursday

6. Meal Plans (if applicable): Meals are included in cost, students will bring money for meals on the way down and back

7. Is school bus transportation required?  Yes  No How many? 1

8. Will a coach bus be required?  Yes  No How many? \_\_\_\_\_

9. Are private cars to be used?  Yes  No If yes, how many cars will be used? 1

Who are the drivers? School van may be used if available

Are all of the cars to be used covered by at least \$50,000 - \$100,000 (preferably \$100,000 - \$300,000) of insurance, and do you have proof?  Yes  No

10. The district is requested to pay \$ 0 out of the total cost of \$ \_\_\_\_\_

Account Code Number \_\_\_\_\_

11. If the district is not expected to pay all of the costs, what other funds are going to be used?

FFA Account, Students will pay half their costs Account Code, if appropriate: FFA Activity 18105

Notes: \_\_\_\_\_

12.  For overnight field trips, a list of Students and Chaperones is attached.

13.  A brief itinerary/description of trip is attached.

14. Signature of Teacher: Melanie Berndtson Date Submitted: 9-5-17

15. Principal's Approval: Roy L. Kuy Date: 9/11/17

16. Superintendent's Approval: Dr. Brenda M. Freeman Date: 9/18/17

17. Received by Transportation Coord.: \_\_\_\_\_ Date: \_\_\_\_\_

18. Estimated Cost: \_\_\_\_\_ Bus Contractor: \_\_\_\_\_

- Distribution:
- Original - Superintendent/Transportation Coordinator
  - Copy 2 - Building Secretary
  - Copy 1 - Business Office (SS, FS, AA)
  - Copy 3 - Faculty Member

Attachment X-3A-5