

**WELLSBORO AREA SCHOOL DISTRICT
Field Trip Transportation Request Form**

1. Teacher: A. Whitney, H. Ladd, K. Rendos School: WAHS & RLBMS
2. No. of Students: 12 Adults: 3 Class or Organization: Student Council
3. Date of Trip: 11/4 & 11/5 Destination: Boyertown Area High School Total Miles: ~400 miles
4. Estimated departure time: 6:30 a.m. on 11/4 From: Wellsboro Area High School Commons Parking Lot
5. Estimated return time (arrival in the district): 7:30 p.m. on 11/5
6. Meal Plans (if applicable): Students will purchase meals en route to conference. At the conference meals are provided.
7. Is school bus transportation required? Yes No How many? _____
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? 3-Jan
- Who are the drivers? Mrs. Ladd, Mrs. Rendos, & Mrs. Whitney; We have also requested use of the school van.
- 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 \$ 2905
- Account Code Number _____
11. If the district is not expected to pay all of the costs, what other funds are going to be used?
Student Council funds will be used. Account Code, if appropriate: _____
- 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: *Ambry Whitney* Date Submitted: 10/4/2022
15. Principal's Approval: *[Signature]* Date: 10/4/22
16. Superintendent's Approval: *[Signature]* Date: 10/10/22
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