

**VAN / BUS REQUEST FORM**  
WISCONSIN HEIGHTS SCHOOL DISTRICT

**PLEASE PRINT CLEARLY**

**Request is for:**       Van       Bus

Date bus/van is needed \_\_\_\_/\_\_\_\_/\_\_\_\_

Leaving from: \_\_\_\_\_

Destination to: \_\_\_\_\_

Event: \_\_\_\_\_

Description and justification of trip:

\_\_\_\_\_

\_\_\_\_\_

Time of departure: \_\_\_\_\_ a.m./p.m.

Teacher requesting: \_\_\_\_\_

Leaving destination: \_\_\_\_\_ a.m./p.m.

Contact phone number: (\_\_\_\_) \_\_\_\_\_

Time back at school: \_\_\_\_\_ a.m./p.m.

Teacher, and/or other adults going \_\_\_\_\_

Are there special accommodations needed for handicapped students?    Yes       No

Are there any other special instructions (coolers, equipment, etc.)?

\_\_\_\_\_

\_\_\_\_\_

Estimated cost of the trip:

\_\_\_\_\_ Miles @ \$1.26/mile =      \$ \_\_\_\_\_

\_\_\_\_\_ Driver hours @ \$17.37 =      \$ \_\_\_\_\_

**Total Cost of trip (estimate) \$ \_\_\_\_\_**

Bus company actual numbers:

\_\_\_\_\_ Miles @ \$1.26/mile =      \$ \_\_\_\_\_

\_\_\_\_\_ Driver hours @ \$17.37 =      \$ \_\_\_\_\_

**Total Cost of trip (actual) \$ \_\_\_\_\_**

Accounting code to be billed to: **(must be provided)** \_\_\_\_\_

Signature of requestor: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Staff/advisor)

Authorized by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Principal)

Approved by: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(District Administrator)

Form faxed/emailed to bus company: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time: \_\_\_\_\_ a.m./p.m.

Confirmation received:  Yes       No      Van approval from B&G department:  Yes       No