

TODAY'S DATE

(mm/dd/yy)

LOS ANGELES UNIFIED SCHOOL DISTRICT
TRANSPORTATION SERVICES DIVISION
APPLICATION FOR AUXILIARY TRANSPORTATION/TRIP(S)

FOR OFFICE USE

JOB NO.

Funding Source (check one): [ ] Reimbursable [ ] Student Body

[ ] Program FUND AREA PROG CODE

SCHOOL

REQUESTING SCHOOL'S NAME SCHOOL PHONE NUMBER & EXT. LOCATION CODE

PK-K [ ] 1 [ ] 2 [ ] 3 [ ] 4 [ ] 5 [ ] 6 [ ] 7 [ ] 8 [ ] 9 [ ] 10 [ ] 11 [ ] 12 [ ]

SCHOOL FAX NUMBER ESC CALENDAR TRACK SCHOOL TYPE CHECK GRADES

[ ] MR. [ ] MS.

RESPONSIBLE ADMINISTRATOR

RESPONSIBLE ADMINISTRATOR E-MAIL ADDRESS

[ ] MR. [ ] MS.

CONTACT PERSON

CONTACT PERSON E-MAIL ADDRESS

DATE(S)

DATE OF TRIP (OR OF 1ST TRIP) (mm/dd/yy)

DATE OF LAST TRIP (IF A MULTI-DATE TRIP) (mm/dd/yy)

[ ] [ ] [ ] [ ] [ ] [ ] [ ] M T W TH F SA SU CHECK DAY(S) OF TRIP(S)

TIMES

[ ] AM [ ] PM

REQUESTED PICK UP TIME (hh:mm)

[ ] AM [ ] PM

REQUESTED ARRIVAL TIME (hh:mm)

[ ] AM [ ] PM

REQUESTED DEPARTURE TIME (hh:mm)

[ ] AM [ ] PM

REQUESTED RETURN TIME (hh:mm)

[ ] YES [ ] NO

IS THIS A ONE-WAY TRIP?

SEATBELT / LAP RESTRAINTS [ ] STORAGE COMPARTMENTS [ ]

CHECK IF REQUIRED

# OF PUPILS

# OF ADULTS

# OF WHEELCHAIRS

# OF BUSES REQUIRED

IMPORTANT:

- ALL TRIPS MUST BE BETWEEN THE HOURS OF 9:00 AM - 2:00 PM UNLESS APPROVED IN ADVANCE BY THE TRANSPORTATION SERVICES DIVISION SENIOR BUS DISPATCHER. ANY QUESTIONS, CONTACT 213-580-2900.
CANNOT EXCEED 65 PASSENGERS PER BUS.
ADDITIONAL PASSENGERS MAY REQUIRE THE SCHEDULING OF AN ADDITIONAL BUS.

FOR SCHOOL JOURNEY TRIPS ONLY

1 LIST 3 CHOICES IN COMMENT SECTION (FROM FIELD TRIP HANDBOOK, APPENDIX D, PART A).

2 HAS APPOINTMENT BEEN MADE BY SCHOOL WITH THE SITE?

[ ] YES [ ] NO

TIME OF APPT.

3 DATES PREFERRED

(mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy)

4 DATES TO AVOID

(mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy) (mm/dd/yy)

COMMENTS/CHOICES

DEPART FROM/FIRST PICK UP

SCHOOL / LOCATION NAME

ADDRESS, CITY, ZIP

DESTINATION NAME

LOCATION CODE (IF APPLICABLE)

PLACE NAME

PHONE NO. & EXT.

ADDRESS, CITY, ZIP

SIGNATURE

PRINCIPAL/ADMINISTRATOR

E-MAIL ADDRESS

NOTE:

Refer to Field Trip Handbook for detailed instructions on arranging trips. Submit this completed form 15 working days before the requested trip date to enable buses to be allocated in a timely and cost-efficient manner and trip confirmations to be received by schools prior to the day of the trip.

FOR TRANSPORTATION DISPATCH USE ONLY:

School Journey Tracking #

ENTRY DATE

ROUTE #(S)

ENTERED BY

D#

REVIEWED BY

A#

Submit to Transportation Services Division. Retain a Signed Copy at School.