Port Townsend School District -- STUDENT TRAVEL
STUDENT TRAVEL AUTHORIZATION - TRANSPORTATION REQUEST

DUE TO PRINCIPAL AT LEAST 14 DAYS IN ADVANCE OF TRIP
(30 DAYS IN ADVANCE OF OVERNIGHT TRIP, TO ENSURE BOARD APPROVAL)

☐ Field Trip  ☐ ASB Activity  ☐ Other __________________________

Submitted by: __________________________ Date of Request: ________________
(teacher/advisor/coach)

School/Group (include Grade level): __________________________________________

Date(s) of trip(s): __________________________ # of Students: _______ # of Adults: _______

School/Pick-up Point: __________________________________________________________
Departure time: ____________ am/pm

Destination(s): ______________________________________________________________
Return time: ________________ am/pm

Address: __________________________ City/State: __________ Zip Code: __________
Contact name/Phone: __________________________________________________________

Funding Source: __________________________ Charge to GF: 10 E 530 _______ 007x _________
(Description) Account Code: ______________

Charge to ASB: 40 E 530 _______ 00 0000 _______
(Account Code: ______________

FIELD TRIPS: District Policy/Procedure #2320P: “Field trips are defined as travel away from school premises, under the supervision of a teacher, with an approved course of study, for the purpose of affording students a direct learning experience not available in the classroom.”

Reason for trip (List educational purpose of the trip, objectives/activities planned): __________________________
______________________________________________________________

How will students be transported?: ☐ District Bus  ☐ District Van  ☐ Other____________

Yes [ ] / No [ ] -- Substitute(s) required?  Yes [ ] How many? ____________

Yes [ ] / No [ ] -- Sample itinerary and parent permission slip attached?

Yes [ ] / No [ ] -- Food Services notified?

DISTRICT TRANSPORTATION REQUEST:  ☐ Bus Transport __________  ☐ District Van __________
estimated # estimated #

# of Student in Wheelchairs: ________  *Ferry Required -- Yes [ ] / No [ ]
Which Terminal?

Other Information: ______________________________________________________________

*(WSDOT requests notification 72 hours in advance of all school travel by ferry - bus, van, or walk-on; must include estimated number of students under 90 lbs.)

Building Approval: __________________________ District Approval (out-of-state &/or overnight trips)
(Principal) __________________________ (Date) __________________
(Superintendent/Designee) __________________________ (Date) __________________

Distribution -- Signed/Approved Copies to: ☐ Requester, ☐ Building Secretary, ☐ District Office