

LORAIN ISD
TRANSPORTATION REQUEST

Today's Date: _____ Date Needed: _____

Class/Organization Making Request: _____

Destination: _____

Purpose of Trip: _____

Departure Time: _____ Return Time: _____

Number of Passengers: _____ Vehicle(s) Needed: _____

Requested By: _____

Approved By: _____ Date: _____

Do these students need lunches? _____

Number of lunches needed- _____

The Field Trip Manager must give Mrs. Hernandez a copy of this request, if the students are gone at lunchtime.

Approved by: _____ Date: _____

Vehicle Assigned: _____

Cell Phone Assigned: _____

Upon return from trip, clean the vehicle.