

2023-2024
REQUEST FOR TRANSPORTATION
DELANO PUBLIC SCHOOLS

Date of Trip: _____ Departure time: _____ am/pm

Return time: _____ am/pm

Destination: _____ City: _____

Group taking trip: _____ # of Riders _____

Need Trailer ___ yes ___ no

Contact person: _____ ext: _____

Purpose of trip: _____

Bus loading site: _____ Time: _____

Chaperones: _____

Meal Stop at: _____ City: _____

FOR BUDGET PURPOSES:

(Estimated Trip Cost:) _____ Hours @ \$25.08/hour \$ _____ *

_____ Miles @ \$1.93/mile – Bus _____ *

_____ Miles @ \$1.93/mile – Mini Bus _____ *

_____ Miles @ \$1.46/mile – Van _____ *

Use of trailer @ \$60.50/trip _____

Admissions or Fees _____

_____ Meals ___ bag ___ purchased _____

Gross Cost

Less _____ fees @ \$ _____ \$ _____

NET DISTRICT COST \$ _____

*(note: Minimum cost = \$60.50)

Budget Code: _____ - _____ - _____ - _____ - _____ - _____

or

Activity Account: _____

Requestor: _____ Date: _____

Approved by: _____ Date: _____

**A completed copy must be faxed to Stahlke Bus Co. (972-3757) or email info@stahlkebus.com .
Submit the original to Mary Reeder, District Office, and keep a copy for your records.**