

# FIELD TRIP / VEHICLE REQUEST FORM

ALMIRA SCHOOL DISTRICT No. 17

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

Date of Trip: \_\_\_\_\_

Class or group traveling: \_\_\_\_\_

Purpose of trip: \_\_\_\_\_

Lunch arrangements: \_\_\_\_\_

Time leaving Almira: \_\_\_\_\_ Time arriving Almira: \_\_\_\_\_

Time leaving Hartline: \_\_\_\_\_ Time arriving Hartline: \_\_\_\_\_

Time leaving C.C.: \_\_\_\_\_ Time arriving C.C.: \_\_\_\_\_

Total number of people needing transportation: \_\_\_\_\_

In case of emergency, contact on the trip will be: \_\_\_\_\_

And can be reached by phone number: \_\_\_\_\_

Requested by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**The approval of the request will be dependent on the availability of funds in the budget. The district has a motor vehicle which individuals will be required to use when available. If the district vehicle is not available then the individual may use their own vehicle and be reimbursed at the rate established by the IRS. All travel expenses must be submitted within 30 days from the time they are incurred to obtain reimbursement. Every effort should be made to consolidate transportation needs when more than one person is attending the same function. If you are involved in a traffic accident, notify the police. Do not make any statements which may be held against you. Call one of the administrators at these numbers:**

**Kelsey Hoppe – 509-641-0168**

**Justin Manning 641-0154**

**If an accident should occur, obtain the following information:**

Name of other driver: \_\_\_\_\_

Car license number: \_\_\_\_\_

Other Driver's Insurance Company: \_\_\_\_\_

Witnesses: \_\_\_\_\_

Injuries, if any: \_\_\_\_\_

Police Officer at scene: \_\_\_\_\_

Copies distributed:

Transportation \_\_\_\_\_

Food Service \_\_\_\_\_

Principal \_\_\_\_\_

Teacher \_\_\_\_\_

Nurse \_\_\_\_\_

Secretary \_\_\_\_\_