



Nassau BOCES Transportation

100 Haskett Drive • Building A • Syosset, NY 11791

Phone: 396-2020 • Fax: 496-7155

REQUEST FOR TRANSPORTATION FIELD TRIP

Environmental Education _____ Career & Technical Education _____ Special Education _____

Person Booking Trip _____ Phone # _____ Today's Date _____

District _____ CoSer # _____

School _____ Program _____

Age level _____ Day of the week _____

Pick-up at _____ Date(s) of trip _____

Departure time from school _____ Departure time from location _____

For overnight trips:

Departure date _____ Departure time from school _____

Anticipated time of arrival at site _____

Departure date from site _____ Departure time from site _____

Anticipated time of arrival at school _____

For all trips:

Name of teacher(s) making trip _____

Name of teacher in charge _____ Wk Phone # _____ Cell # _____

Number of different classes _____ Total # of children _____

Total # of adults _____

Exact name and address of trip location _____

Person to contact at location _____

Purpose of trip _____

Special requests/needs _____

TOTAL # OF BUSES REQUESTED _____

To be complete by department chairman, coordinator, or assistant principal

Approved by _____ Title _____ Date _____

To be completed by Transportation Department

Date given to contractor _____ Cost per bus _____

Contractor _____ Total cost _____