New Buffalo Area Schools

Bus Requisition

Date of Trip ___________________________ Day of Week ___________________________

Time of Departure ___________________________ Time of Return ___________________________

Destination ___________________________

Number of Students ___________ Number of Chaperones ___________ Number of Buses ___________

Purpose of Trip:

Transportation Department Contacted? Yes _____ No _____

Teacher ___________________________ Date Requested ___________________________

Principal ___________________________ Superintendent ___________________________

Distribution: Teacher, Principal, Transportation, Superintendent