CENTRAL UNION HIGH SCHOOL DISTRICT

TRANSPORTATION REQUEST

BUSES

PLEASE SUBMIT TO SCHOOL SECRETARY

Requests for transportation within the county must be in the principal's office <u>no later than THREE (3) DAYS PRECEDING</u> the day it is needed; trips out of the county, at least a <u>WEEK IN ADVANCE</u> of the day it is needed.

Date:	Requested by:		
Phone Number:	Cell Number:		
NUMBER OF BUSES REQUESTI	NG: NUMBER OF STUDE	ENTS# OF ADULTS	
Please select one: CUHSD Bus _	Charter Bus:		
Please note: charter bus arrangen	nents must be made by request	or	
Class, Club, Organization:			
Chaperones:			
Educational or Other Justification:			
Departure: Place:	Date:	Time:	
Destination Address & Place:	Date	e: Time:	
Destination Address & Place:	Date	e: Time:	
Destination Address & Place:	Date	e: Time:	
Return to El Centro: Place:	Date:	Time:	
Charge to:		CUHS Student Account PO#	
	(must have #	if it's a club trip)	
All students need to have a permissio before transportation is requested. Pe			
Teacher/Advisor Signature:			
Principal:		Date:	
(FOR OFFICE USE)			
Comments/Instructions:			
REQUEST ID#	DATE ENTERED:		