

**SACRAMENTO CITY UNIFIED SCHOOL DISTRICT
TRANSPORTATION BUS REQUEST (Form 203) FOR
CLASSROOM FIELD TRIP (TRA-F006)**

All Field Trips are booked at least fifteen (15) days prior to the Field Trip requested and on a first come first serve basis upon receipt by date in the Field Trip Office.

Please send completed form to: Lucy Becker, Field Trip Office, Box 844B (916) 277-6703

ALL FORMS MUST BE COMPLETELY FILLED OUT. INCOMPLETE FORMS WILL BE RETURNED.

School Code #: _____ **School Name:** _____

Teacher(s) Name(s): _____

Grade Level: _____ **# Of Students:** _____ **# Of Adults:** _____ **# Of Classes:** _____

Of Special Ed. Students: _____ **L.H.** _____ **S.H.** _____ **R.S.P.** _____
(If you need a Wheelchair Bus, please contact the Special Education Department @ 643-9188 to set up a bus for your Field Trip.)

Budget Code: _____
(Mandatory) _____

Approved By: _____
Principal Signature

1st Choice **Pick-Up Time:** _____ **Tour Time:** _____ **Leave Time:** _____

Destination Code #: _____ **Destination:** _____

Month(s) Desired: _____
(Please make sure you have me schedule around your sites testing dates.)

2nd Choice **Pick-Up Time:** _____ **Tour Time:** _____ **Leave Time:** _____

Destination Code #: _____ **Destination:** _____

Month(s) Desired: _____
(Please make sure you have me schedule around your sites testing dates.)

FOR FIELD TRIP OFFICE USE ONLY

Field Trip Sequence #: _____ Scheduled Date: _____

Date Entered: _____ Pick-Up Time: _____ Tour Time: _____ Leave Time: _____

• NOTE: MANDATORY THAT ALL SHADED AREAS MUST BE FILLED OUT.