

Transportation Director  
Fred Dominguez  
719-376-7007

## South Conejos School District Transportation & Field Trip Request

Employee/ Sponsor: \_\_\_\_\_ Position: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Event:

School Sponsored Field Trip.       Conference / Meeting: \_\_\_\_\_  
 Activity Sponsored Field Trip.       Other: \_\_\_\_\_  
 Overnight Trip.

Details: \_\_\_\_\_  
Destination: \_\_\_\_\_  
Purpose: \_\_\_\_\_

Departure Date: \_\_/\_\_/\_\_\_\_.      Return Date: \_\_/\_\_/\_\_\_\_.

Departure Time: \_\_:\_\_.      Arrival Time: \_\_:\_\_.      \_\_\_\_\_

Type of Vehicle(s) requesting:  SUV.    CAR.    MINI-BUS.    FULL BUS.

Please Specify: \_\_\_\_\_

Any Staff member who drives a District Vehicle needs to take a yearly written exam, as well as a driving test per CDOT Regulations.

Number of Passengers \_\_\_\_\_.

Only SCSD Staff, or Students Permitted. Anyone else must get written consent by Superintendent, and or School Board.

Approved:       Denied:  \_\_\_\_\_  
Transportation Director Signature      Date:

Approved:       Denied:  \_\_\_\_\_  
Principal Signature      Date:

Approved:       Denied:  \_\_\_\_\_  
Superintendent Signature      Date:

**Documentation Needed:**  
**Request form must be accompanied with a Proposed Agenda. If this request is a Field Trip, All paperwork must be submitted two weeks prior to event.**  
**Key Return: Keys shall be returned immediately to Transportation Director, Or at key drop just inside the receiving area on the East Wall. There will be a sign out form.**  
**Returning Vehicles: If returning a vehicle after hours, DO NOT LEAVE VEHICLES IN SCHOOL PARKING LOT. PARK VEHICLE ON EAST SIDE OF BUILDING. Driver, please make sure logs are filled out correctly, and vehicle is cleaned, and fueled for the next driver. Please show courtesy to other drivers. If you CAN NOT clean of fuel the bus please notify the Transportation Director. Your signature above acknowledges you that you agree to above terms.**

\_\_\_\_\_  
Transportation Dept. Use Only  
Driver for Trip: \_\_\_\_\_ Bus Number: \_\_\_\_\_  
Leave Time: \_\_\_\_\_.

