TD1(b)
Superintendent School Bus Funding Application
SCHOOL DISTRICT NO. 22 (VERNON)
APPLICATION TO USE SCHOOL BUSSES & LOU 14 FUNDING
FOR OTHER THAN DAILY TRANSPORTATION

TD1(b)

TRIP #

Once completed email to activitytrips@sd22.bc.ca

1. **Trip Date:** _____ **# of students:** _____ **Grade:** _____ **# of Adults:**_____

2. **FROM:** _____ **AT:** _____
(Specify location and proper address) **(Departure Time)**

3. **TO:** _____ **RETURN:** _____
(Specify location and proper address) **(Departure Time)**

4. **Additional Details:** _____

5. **Special Request:** **Compartments** ☐ **Wheelchair:** ☐ **Harness:** ☐ **5 pt** ☐ **In-Seat**

6. **Account Code:** _____ **School:** _____

7. **Teacher/s:**_____ **Contact Name & Cell Ph#:** _____
(While on trip for driver)

8. **School Department:** _____**Purpose of Trip:** _____

_____ _____
DATE OF APPLICATION **APPROVED BY:**

OFFICE USE:

Trip Estimate Provided by Transportation: _____

Superintendent Approval: _____ Date:_____

Itinerary if overnight or multiple drop off locations. Include pickup and return times and locations.

RECEIVED:

EMAILED DATE : EMAILED TO:

Revised May2024