



Shiprock Associated Schools, Inc Transportation Department

Transportation Request

In order to meet and schedule the transportation needs,
the following time lines must be adhered to:

50 mile radius Submit one week in advance

Over 50 mile radius Submit two weeks in advance

The request must have all required signatures before ANY scheduling
will be done. The person requesting (YOU), your immediate supervisor,
and the Transportation Department.

Traveler: _____ Date: _____

Destination: _____

Purpose of Trip: _____

Departure Date: _____ Departure Time: _____

Return Date: _____ Return Time: _____

Number of: **ADULTS** _____ **STUDENTS** _____

Requested by: _____

Supervisor Signature Date

Transportation Coordinator Date

Vehicle Assigned: _____ Driver: _____

revised 6/25/2012

ORIGINAL - Transportation **YELLOW** - Requestee **PINK** - Security