



# *Polson School District #23*

## **DISTRICT VEHICLE REQUEST FORM**

Please NOTE!!!

**Requests for District Vehicles must be made at least 2 weeks in advance. The Vehicle is to be picked up & RETURNED to the Bus Garage on the day of return date – indicated below!!!**

Current Date: \_\_\_\_\_

Transportation Request For: \_\_\_\_\_

Activity: \_\_\_\_\_ Destination: \_\_\_\_\_

# of People \_\_\_\_\_ Who will Drive: \_\_\_\_\_

Leave information:

Day of the Week \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Return information:

Day of the Week \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature: \_\_\_\_\_  
Person Responsible

Approved: \_\_\_\_\_  
Principal / Director

Approved: \_\_\_\_\_  
Superintendent