

# Request for bus travel for 'After School Activities'

During Term 1 / 2018, Year 4 - 12 Students

1 Student Name:

2 Daily Bus Stop:

3 Year Level:

4 Why do you need to catch the Late Bus? (please tick)

Late afternoon service

Sport (specify) ▶

Other activity (specify) ▶

5 Member of Staff in Charge:

6 Which morning/s do you need the Late Bus during Term 1, 2018? (please tick)

Mon  Tue  Wed  Thu  Fri

7 Authorised by:   
Staff Member Name

## Transport Office Approval

(To be filled out by transport office)

Students Name \_\_\_\_\_

Late Bus # & Stop \_\_\_\_\_

Pick up time \_\_\_\_\_

Days of use \_\_\_\_\_

Transport Staff member's signature:

\_\_\_\_\_  
**You are authorised to use this Late Bus & Stop  
on the days nominated during Term 1, 2018 ONLY**

