

EXTRA-CURRICULAR BUS SERVICE REQUEST

Minnetonka Public Schools

Control Number _____

For best service, be sure to complete and forward this trip request as soon as the trip details are known. Unless otherwise requested, buses may be scheduled to transport more than one group simultaneously or sequentially.

EMAIL TO: Nicole.Bedmark@firstgroup.com,
Erica.Campbell@firstgroup.com

[] FIRST STUDENT BUS COMPANY (Office: 952-470-5366)

FROM: _____
School/Department _____ Group Manager _____
Type of Activity _____ Phone Number _____

RE: Please provide the following transportation for our group: _____
Date of Request _____ Number of Buses Requested _____

Group Name _____ Trip Date _____ Total Adult Riders _____ Total Student Riders _____ # Wheelchairs _____

Bus Driver's Directions Provided By: Group Manager _____ Bus Company _____

		SPECIAL INSTRUCTIONS	
		If Yes, explain in Comments field	
Boarding Location	Pick Up Time	Bus stays with group	____ Yes ____ No
Destination	Arrival Time	Bus Drops & Returns*	____ Yes ____ No
Address		Need equipment space	____ Yes ____ No
Reboarding Location	Pick Up Time	Call Group Manager	____ Yes ____ No
Return Location	Return Time	Need Bus Para for Wheelchair*	____ Yes ____ No
Comments:		*Extra Charge	
		Estimating Capacity	
		25 Seats per Bus/77 Max. Passengers	
		K-5th up to 3 per seat	
		6th-12th - 2 per seat (max. 50)	
		Adults - 2 per seat (max. 50)	
		Wheelchair - Up to 4 per bus -Capacity of 41 passengers K-5th; 25 passengers 6th-Adult	

Instructions to Bus Contractor: If able to provide the requested service, sign this form, make a copy for your records, and send the copy with your original signature to the requestor. When the service has been provided send the invoice for payment to the requestor.

Send invoice to: _____

Signature of Requestor _____ Confirmed - Bus Contractor _____

Authorization for Payment: Account Number _____ \$ _____
Account Number _____ \$ _____
Approval Signature _____ Total Estimated Invoice \$ _____

Request will not be processed without an account number and an approval signature

ALWAYS CALL AND CONFIRM YOUR BUS AT LEAST 24 HOURS IN ADVANCE

Charter and Field Trip Guidelines must be followed for all Extra-Curricular Requests

(Guidelines are available on Minnetonka Public School District Website and from Bus Driver)

A coach/teacher/chaperone must be present on each bus whenever there are students on board

EXTRA-CURRICULAR BUS SERVICE REQUEST

2018-2019 ESTIMATION OF EXTRA-CURRICULAR TRANSPORTATION EXPENSE

Mileage & Hours charges begin with pick-up time at school and accumulate to actual arrival time at return location

Allow one week for processing of requests, requests of less than three days will make best effort to accommodate

48 Hour cancellation required to avoid minimum 2 hour cancellation fee

ALWAYS CALL AND CONFIRM YOUR BUS AT LEAST 24 HOURS IN ADVANCE

FIRST STUDENT BUS COMPANY (952-470-5366) (Fax: 952-470-9684)

Small buses (9 pass to 24 pass)

Large buses (71-77 passenger)

Field Trip Rate/Co-Curricular Trip Rate

2.00 hr/under 40 miles	\$124.53
2.50 hr/under 40 miles	\$149.34
3.00 hr/under 40 miles	\$174.14
3.50 hr/under 40 miles	\$198.95
4.00 hr/under 40 miles	\$223.75

Additional Charges

Over 40 Miles: Add \$2.18 per mile

Over 4.00 hours, please call First Student, Inc. or the Transportation Office

Wheelchair Lift (up to 4 per bus)

Para (from First Student

Trailer (each)

Bus Parking Fee (average-will charge actual)

Overnight Charge (Per Bus)

Cancellation (Point of Origin-no notice)

Cancellation (l <= 48 hours

Estimating Capacity

25 Seats per Bus/77 Max. Passengers

K-5th Grade up to 3 per seat

6th-12th - 2 per seat

Adults - 2 per seat

Wheelchair - Up to 4 per bus /
capacity up to 41 passengers K-5;
25 passengers 6-12th grades

\$10.98 Based on availability, must give 2 week notice, no para provided

\$29.54 per hour

\$100.42

Actual Charge

\$140.00

\$75.00

\$50.00

Revised 7/14/2021