Travel Request Form						
Welcome to Farmington Municipal Schools Travel Tracker, your one-stop travel center. Within this software, you can submit student field trip requests, reserve a bus for a field trip or athletic event, and reserve a district vehicle for staff travel. If you have any questions or comments please contact the TransACT support desk by clicking on the Support/Training Links in the upper right-hand corner.						
Please review Procedures for Field Trip/Athletic and Activity Trips						
For additional help please visit this link for	r Procedures for Field	Trip/Athletic and Ac	tivity Trips			
Trip Number	29286					
* Category	Travel With Students					
* Type of Trip	Athletic					
* Athletic Event (you may check more th	an one)					
Softball (Athletic)						
Trip Leave		Trip Return				
* Date 3/12/24	Tuesday	* Date	3/12/24	Tuesday		
* Time 7:45 PM		* Time	10:00 PM			
Actual Time TBD No						
Trip Year/Week 2024-11						
Use this button to create recurring/overnigh Note: Recurring trips are not created unt 3/13/24, 3/14/24, 3/15/24, 3/16/24 * Does this trip require Board approval? Ye	til this trip is approve		ot use Recurring for sta	(i) ff only trips.		
Comments	n/a					
* Your School/Dept (i)	32 Piedra Vista High School					
5700 College Blvd., Farmington, NM 87402						
* Do you have students with health concerns on this trip? Don't list student names, only the health conditions due to HIPPA.	No					
* Main Destination (i)	Other (Type Belov Torrance, CA, USA					

Travel Tracker

Destination Not Listed	Torrance, CA, USA * Destination Name WILSON PARK		
* Approximate Nbr of Miles Round Trip	800.00		
Funding Source * #1 (if one group or school is paying)	h School Budget Code softball		
Funding Source School Budget Desc	Budget Code Desc		
Funding Approver			
Funding Source #2 (if trip is being split Select between groups or schools)	Budget Code		
Funding Source Desc	Budget Code Desc		
Funding Approver			
* Teacher / Advisor / Staff Name	WERTH		
* Teacher / Advisor / Staff Phone #	5053301506		
Teacher / Advisor / Staff Email			
Note: This email will receive the requester e	mails if different from requester		
Emergency Contact Info	Same as Teacher / Advisor / Staff		
* Emergency Contact Name	ROY JOHNSON		
* Emergency Contact Phone #	5055998880		
Special Indicators Bus is not required to remain with the group. This is for local trips only.			
Number of Individuals Making	J Trip		
* Total Adults	4		
* Total Students	16		
* Will the students be away from school during lunch?	Yes		
* If so, will these students need packed lunches?	No		

Nbr Students 16 Teacher WERTH

Students will be away from school during the lunch period.

- * Will you be using outside transportation (charter bus, train, plane, etc...) This option means you will not need an FMS Bus or Yes District Vehicle.
- * Please indicate mode of travel. Please include details of trip, including itineraries. Indicate chartered transportation company if applicable.

CHARTER. Herrera

Name

Vehicles Needed				
* Do you need to schedule buses or other vehicles? If no this means you are using outside transportation. No				
Person Submitting Request Date Submitted	kwerth@fms.k12.nm.us			
Level 01 Approval - Loc	ation Approval			
Comment				
Recurring Dates				
3/13/24, 3/14/24, 3/15/24, 3/1	6/24			
Decision	Approved			
Name	swulfert@fms.k12.nm.us			
Decision Date	Sep 21, 2023, 9:46:09 AM			
Level 02 Approval - Sec	ond Level Location Approval			
Comment				
Decision	Approved			
Name	aalucero@fms.k12.nm.us			
Decision Date	Sep 22, 2023, 9:36:00 AM			
Level 04 Approval - Dire	ector Approval			
Comment	This trip will be on the agenda for the Oct. board meeting.			
Decision	Approved			
Neme	in an han Ofree 140 and an			

Decision Date Sep 22, 2023, 10:44:19 AM

Level 07 Approval - Superintendent Approval

Comment	
Decision	Approved
Name	cdiehl@fms.k12.nm.us

igamboa@fms.k12.nm.us

Decision Date

Level 09 Approval - Transportation Approval

Comment

Decision

Name

Decision Date