

Sustainability and Purchasing Department 363 North Woods Mill Road Chesterfield, MO 63017

Phone: (314)415-8251 Fax: (314)415-8252

Checklist for Travel Agency Charter Bus

Trip: _	Date:	
Spons	soring Teacher(s)/Director:	
Conta	ct Information: Phone # Email address:	
Name	of Group/School:	
Signat	ture of Approver: Printed Name: (School Principal, Coordinator, or Athletic Director)	
	of Approver:	
	of Travel Agency:	
Agent	s Name: Phone #:	
If a Tra	avel Agency is providing Charter Bus transportation the following checklist <u>must</u> be followed. T	his is
neces	sary for insurance purposes.	
	Contact the Purchasing Department by e-mail (kshannon@parkwayschools.net) with the nan the travel agency, travel agent name and contact information along with the date of the trip.	
	The Purchasing Department will contact the travel agency to verify that Parkway's charter buinsurance requirements have been met.	IS
	The Purchasing Department will email the Sponsoring Teacher/Director the insurance form ureceiving this verification.	pon
	A representative of the school then contacts the travel agency to confirm trip.	
	The budget secretary then enters a requisition into MUNIS with the following information lis General Notes (be sure to check the "Print on PO" box): Travel Agency Confirmation # Insurance has been verified Invoice must reference the purchase order # For Confirmation only – Do Not duplicate	ted in
	Attach a copy of the checklist and certificate of insurance to the requisition.	
	Send a copy of this completed form with the contract to be signed by the CFO.	
	Name of person completing this form:	