



## AP 7-614 – PASSENGER MANIFEST FORM

<b>BOOKED BY</b>	<b>SCHOOL</b>	<b>IN TRIP CONTACT PERSON</b>
<b>TRIP#</b>	<b>TRIP DESTINATION</b>	<b>DATE(S)</b>
<b>DRIVER'S NAME</b>	<b>BUS#</b>	<b>GRADE/CLASS</b>

<b>PASSENGER LIST</b> Please identify adults with an asterisk (*) following their name		
1.	25.	49.
2.	26.	50.
3.	27.	51.
4.	28.	52.
5.	29.	53.
6.	30.	54.
7.	31.	55.
8.	32.	56.
9.	33.	57.
10.	34.	58.
11.	35.	59.
12.	36.	60.
13.	37.	61.
14.	38.	62.
15.	39.	63.
16.	40.	64.
17.	41.	65.
18.	42.	66.
19.	43.	67.
20.	44.	68.
21.	45.	69.
22.	46.	70.

*The personal information contained on this form is collected under the authority of the Public Schools Act, the Education Administration Act and the Freedom of Information and Protection of Privacy Act for the purpose of participating on school trips. If you have any questions about this form, please contact your school principal.*