

SOUTH WHIDBEY SCHOOL DISTRICT  
TRANSPORTATION DEPARTMENT  
(360) 221-5209

# VAN REQUEST

School/Program: \_\_\_\_\_ Date: \_\_\_\_\_

Pick-Up Date: \_\_\_\_\_ Time: \_\_\_\_\_ Return Date: \_\_\_\_\_ Time: \_\_\_\_\_

Number of Passengers: \_\_\_\_\_ Estimated Miles: \_\_\_\_\_  
(Include Driver, **MUST NOT** exceed 8 passengers per van) There will be a charge of \$0.60 per mile assessed on all van trips.

Destination: \_\_\_\_\_ Purpose: \_\_\_\_\_

Driver Name: \_\_\_\_\_ Phone/Ext: \_\_\_\_\_  
If **children** will be transported, Driver **MUST** hold District Type II authorization and possess current, valid First Aid Card

Your reservation was received by the Transportation Department. If you need to cancel, please give at least 24 hours notice. A reservation does not guarantee availability.

I understand and agree to the procedures for van use. If I am not the driver of the van, I agree to relate these terms to the driver so a complete pre-trip and post-trip inspection of the district vehicle can be performed.

Transportation	Date	Reserved By	Phone/Ext.
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**Do not write below this line**

- Check the van key board for your Van Assignment.
- Vans should be picked up the day they are to be used, not the night before - unless you are leaving early in the morning (before 7:00 A.M.) then keys may be picked up the day before (by 4:00 P.M.)
- You are **REQUIRED** to complete the "Van Check Sheet" (Pink Copy) in its' entirety. You **MUST** note your starting and ending mileage on this form along with checking off each individual checklist item. **NO EXCEPTIONS!**
- Inspecting the vehicle completely is in the interest of student, passenger and your safety. Failure to properly inspect District vehicles may prohibit this privilege being extended to you in the future.
- Any problems and/or defects with the van must be noted, in writing (on Pink form) to the Transportation Department. If there is a defect that causes the van to be put out of service, notify Transportation to be issued a replacement, if available. Out of service defects include any malfunction or defect in: lights or blinkers, windshield wipers, tires, fluids, mirrors, horn or missing/defective emergency equipment (fire extinguisher, reflectors, body fluid cleanup kit, first aid kit).
- You are responsible for returning the van with the interior in a neat and clean condition. Remove all trash and deposit in the trash dumpster. Check van for lost and found items under seats, compartments, trunk, etc.

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Transportation	Date	Reserved By	Phone/Ext.
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## VAN CHECK OUT SHEET

- ✓ You are **REQUIRED** to complete this "Van Check Out Sheet". You are also **REQUIRED** to note your starting and ending mileage on this form. Failure to complete this Check Out Sheet for each van used may result in discontinuation of van use privilege. Inspection of district vehicles is in the interest of student, passenger and your safety!
- ✓ Any problems and/or defects with the van must be noted, in writing (on this form) to the Transportation Department. If there is a defect which causes the van to be put out of service, notify Transportation to be issued a replacement, if available.
- ✓ You are responsible for returning the van with the interior in a neat and clean condition. Remove all trash and deposit in the trash dumpster. Check van for lost and found items under seats, compartments, trunk, etc.
- ✓ Return the key and check sheet to outside drop box or to box in Transportation Center
- ✓ Check your reservation times and make sure you return the van by your return time.

ITEMS TO BE CHECKED	OK	DEFECT	ITEMS TO BE CHECKED	OK	DEFECT
Fluid Leaks			Fire Extinguisher		
All Gauges			First Aid Kit		
Windshield and Wipers			Body Fluids Kit		
Lights and Turn Signals			Reflectors		
Horn			Backup Alarm		
Tires (tread and pressure)			General Condition		
Doors & Windows			(dents, cleanliness)		

### ITEMS IN NEED OF REPAIR

**I HAVE CHECKED FOR AND REMOVED ALL PERSONAL ITEMS AND TRASH BEFORE RETURNING THIS CHECK SHEET AND KEYS!**

**ENDING MILEAGE** \_\_\_\_\_  
**STARTING MILEAGE** - \_\_\_\_\_  
**TOTAL MILES** = \_\_\_\_\_

YES   
**VAN #:** \_\_\_\_\_  
**SCHOOL/GROUP:** \_\_\_\_\_  
**DRIVER NAME:** \_\_\_\_\_