

SANTO INDEPENDENT SCHOOL DISTRICT
BUS TRANSPORTATION REQUEST AND REPORT
(EXTRACURRICULAR ACTIVITIES)

The Sponsor:

1. **Submit a request for a bus two weeks in advance of date needed.**
2. Fill in all blanks in the top section of the request and sign.
3. Submit request to campus principal for approval and initials.
4. Submit to Christy in the Superintendent's office for scheduling.
5. Form will be returned to driver(s) prior to trip and info posted on Transportation Calendar at <http://www.santoisd.net/Page/933>
6. **Each driver** must return the form to the Supt. office or place in bus mailbox.

Departure Time: _____

Estimated Return: _____

To be completed by trip sponsor

Group/Class Using Bus _____ Date _____

Sponsor _____ Purpose _____

Driver _____ Destination _____

Number of Passengers: Students _____ Sponsors _____

Sponsor Signature_____
Principal's Initials_____
Driver Signature, if different from sponsor

Trip drivers MUST fill this section out. No exceptions.
It is your responsibility, not the Transportation Department's.

Odometer Reading on Returning to School _____

Odometer Reading on Leaving School _____

Total Miles Traveled _____

Down Time (Route drivers only) _____

Bus # _____

Signature, Superintendent

Please use the
calculator on
your phone to
**calculate total
miles traveled!**

Account # _____

For Office Use Only		
# Buses? _____	Trailer Driver? _____	
Driver Names		Date Contacted
Bus Driver 1		
Bus Driver 2		
Bus Driver 3		
Activity Bus Driver		
Truck/Trailer Driver		