BUTLER COUNTY SCHOOL SYSTEM
211 School Highlands Road
Greenville, Alabama 36037-1833
Telephone: 334-382-2665 Fax: 334-382-8607

BUTLER COUNTY
BOARD
OF EDUCATION

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OF EDUCATION
Joseph Eiland

February 24, 2026

TO: Principals, School Bus Drivers, and Club/Athletic Sponsors

RE: Field Trip and Athletics Procedures

FROM: Marcus Burkett, Administrative Assistant of System Operations

Transportation Priority
The primary responsibility of the Transportation Department is daily home-to-school and school-to-home routes. These routes will always take priority over extracurricular or special trips.

TripDirect Requests
Per School Board Policy, all travel requests must be submitted through TripDirect at least **ten (10) school days prior** to the scheduled trip.

- All trips require a TripDirect number and formal approval**.**
- If a bus driver is not available, the trip will not be approved.
- If you have not been contacted regarding your request, please reach out to:
  - Jody Cannon – (334) 525-1440
  - Marcus Burkett – (334) 868-1081

Field Trips
Once bus drivers sign up for field trip participation, assignments will be made based on seniority, availability, and a rotational roster system.
All field trips must have a TripDirect number and approval prior to departure.

Athletic Trips
Coaches must communicate directly with the Transportation Department when a driver is needed, and no coach is available to drive. Transportation personnel will assign the appropriate bus.
All athletic trips require a TripDirect number and approval.

Bus Cleanliness and Return Procedures
Buses must be returned in clean condition.

- Buses returned dirty will result in a $50 cleaning charge to the sponsoring organization or club.
- Drivers/sponsors must sweep the bus and remove all trash.
- All buses will be inspected upon return.

Pre-Trip Inspections and Seating Charts
All trips must include a completed pre-trip inspection and seating chart. No exceptions will be permitted.
Drivers operating their assigned route bus may utilize their current route book and pre-trip documentation.

Field Trip Paperwork Submission
All completed field trip forms must be submitted by Monday, or the next business day, to ensure timely payroll processing.

Group Travel Expectations
Buses traveling for field trips or athletic events should remain together whenever possible.

Speed Compliance
Drivers holding a CDL are expected to follow all training and safety standards. Bus speeds should remain **five (5) miles per hour below the posted speed limit**, regardless of roadway type.

BUTLER COUNTY BOARD OF EDUCATION
TRANSPORTATION REIMBURSEMENT TO BOARD OF EDUCATION
FOR USE OF SCHOOL VEHICLE(S)

DATE:_____ **BUS NUMBER:**_____

BUS REQUESTED BY
(EMPLOYEE NAME)_____

TRIP DESTINATION (CITY)_____

PURPOSE OF TRIP
(*Basketball, Zoo, etc.)***:** _____

TRIP DIRECT #_____**FUNDING SOURCE**_____

Location:

- Georgiana School ☐
- Greenville High ☐
- Greenville Middle ☐
- Greenville Elem. ☐
- McKenzie High ☐
- W. O. Parmer ☐
- Central Office ☐
- Career Academy ☐
- Special Services ☐
- Transportation/ Maintenance ☐
- Other ☐

Departure Time	*Return Time*	ODOMETER READING AT BEGINNING OF TRIP	ODOMETER READING AT END OF TRIP **TO BE COMPLETED BY DRIVER*
TOTAL NUMBER OF MILES			
TOTAL # OF MILES x $1.80 PER MILE		**$**	

TRIP DISTANCE FROM SCHOOL (ROUND TRIP)

ZONE 1: 1 - 100 miles
ZONE 2: 101 - 200 miles
ZONE 3: 201 - 300 miles
ZONE 4: >300 miles

DRIVER PAY

- ☐ ZONE 1: $60
- ☐ ZONE 2: $65
- ☐ ZONE 3: $70
- ☐ ZONE 4: $75
- ☐ OVERNIGHT TRIP: $240
- ☐ COACHES $30
- ☐ NO PAY
- ☐ SUMMER SCHOOL $100

_____ _____
Driver's Name (Please Print) **Driver's Signature**

SCHOOL PERSONNEL MUST PROVIDE A STUDENT ROSTER TO THE BUS DRIVER FOR ALL TRIPS PRIOR TO DEPARTURE

This form must be submitted to the Transportation Department by Monday following the date of trip.

For Central Office Use Only

_____ _____ _____
(1) Transportation Dept. (Initial/Date) ***(2) Payroll (Initial/Date)*** ***(3) Accounting (Initial/Date)***

Revised 05/21/2026

Form TR-II

SCHOOL BUS PRE-TRIP INSPECTION RECORD

School System: ______________________________

Driver Name: ______________________________

Bus Number: ______________________________

Date: Begin ______________ End ______________

Odometer Readings:

A. End Month ____________

B. Beginning Month ____________

C. Miles Traveled ____________

(A minus B = C)

If Items are operating properly, place a check (✓) in the box. If items **are not** operating properly, mark **X** in the box and report it to the Transportation Department.

DATE →																																										
Gallons of Fuel Added																																										
Items to be Checked	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Engine Oil & Coolant																																										
Belts, Wires, & Hoses																																										
Windshield & Windows																																										
Tires & Lugs																																										
Exhaust System																																										
Brakes & Brake Leaks																																										
Park or Emergency Brake																																										
Emergency Exits & Buzzer																																										
Headlights/Hazard																																										
Pupil Loading Lights																																										
Stop Arm/Crossing Arm																																										
Steering Wheel & Horn																																										
Mirrors & Adjustment																																										
Emergency Equipment																																										
Seats & Interior																																										
Driver's Seat & Belt																																										
Service Door/Entrance																																										
Wipers/Washers																																										
Defroster/Heaters																																										
Gauges/Controls																																										
Fuel Tank/Leaks																																										
Springs/Shocks																																										
Driver Initials →																																										

Check camera for solid light daily.
Check radio. Make sure to report if either is NOT working daily.

I certify that I have observed all official regulations.

____

Driver Signature