

London City Schools Dept of Transportation

EXTRA CURRICULAR TRIP REQUEST FORM FOR THE USE OF SCHOOL VEHICLES (Rev: 7/25/17)

Submit all copies to the Transportation Supervisor at least 14 days in advance of the trip.

(INFORMATION TO BE COMPLETED BELOW BY PERSON MAKING REQUEST)

GROUP REQUESTING TRANSPORTATION _____

LONDON CITY SCHOOL BUILDING TO BE PICKED UP AT _____

DESTINATION (Be Specific) _____

TOTAL # OF STUDENTS _____

DATE OF PROPOSED TRIP _____

REQUESTED LOAD TIME _____

ESTIMATED RETURN TIME _____

TYPE & NUMBER OF VEHICLES REQUESTED (BUS, VAN, TRUCK) _____

PERSON IN CHARGE OF GROUP _____ DEPARTMENT FUNDING TRIP _____

NAME OF CHAPERONE(S) _____

SIGNATURE OF PERSON MAKING REQUEST _____ Date _____

SIGNATURE OF SUPERVISOR/PRINCIPAL _____ Date _____

SIGNATURE OF SUPERINTENDENT _____ Date _____

EXTRA TRIP POSTING Trip

IF YOU ARE INTERESTED IN THIS TRIP PUT YOUR NAME ON THE FIRST AVAILABLE LINE BELOW IN NUMERICAL ORDER.

PRINT

SIGNATURE

1.) _____

2.) _____

3.) _____

4.) _____

5.) _____

6.) _____

7.) _____

8.) _____

TRANSPORTATION ASSIGNMENT FORM

On weekends and non-work days, drivers will get paid an additional 30-minutes for Pre-Trip and 30 minutes for Post-Trip for a total of 1 hour.

On a work day, drivers will get paid an additional 15-minutes for Pre-Trip and 15 minutes for Post-Trip for a total of 30 minutes.

The Transportation Supervisor will add the additional time to the total trip time.

This Form Is To Be Completed By The Driver and Returned To The Transportation Director For Compensation

DRIVER'S NAME: _____ DATE OF TRIP: _____

ACTIVITY: _____ LOAD TIME: _____

TIME TRIP COMPLETED: _____ TOTAL DRIVE TIME: _____

BUS# _____ BEGIN MILEAGE _____ END MILEAGE _____ TOTAL MILES _____

NUMBER OF STUDENTS: _____ NUMBER OF CHAPERONS _____

SPONSOR SIGNATURE _____ COACH TIME OF RETURN _____

DRIVERS SIGNATURE _____ DATE _____

THIS PORTION BELOW IS TO BE FILLED OUT BY THE TRANSPORTATION DIRECTOR

TOTAL HOURS _____ (+1 Hour if Applicable) _____ (Minus Overlap Time if Applicable) _____

= Subtotal Hours: _____ X (Hourly Rate) _____ = (Total Pay) \$ _____

Account Financing the Trip: _____

TRANSPORTATION SUPERVISOR SIGNATURE

DATE

NOTES:

