

BLACK HAWK COMMUNITY SCHOOL
EXTRA BUS TRIP REPORT SHEET

Date: _____ Class Instructor: _____

Destination of Trip: _____ Nature of Trip: _____

Bus Driver: _____

Chaperon (s): _____

Bus Number: _____ Capacity of Bus: _____

Total Miles of Trip: _____ Total Time of Trip: _____ (Hours)

Total Hours _____ X \$ _____ = \$ _____ (payment)

Mileage at beginning of trip _____ Mileage at end of trip _____

Loading Time at Gratiot _____ or South Wayne _____

*Return time to Gratiot _____ or South Wayne _____

*(After bus is cleaned)

REMARKS PLEASE: Inside of bus must be cleaned after every extra trip, by the driver to receive full payment of trip.

.....

SIGNATURE OF BUS DRIVER _____

SIGNATURE OF CHAPERON _____

PLEASE RETURN THIS SHEET TO THE OFFICE THE NEXT SCHOOL DAY FOLLOWING THE TRIP.