

Turtle River School Division

Bus Driver's Extra Trip & Practical Arts Report

Driver Name:	Bus Number:	
Departure:	Destination:	
Date of Trip:	Purpose of Trip:	
	•	
TO BE COMPLETED BY BUS DRIVER	(fill out completely)	
Departure Time: Retur	n Time:	Total Time:
AM PM	■	
Odometer reading on RETURN: (return at school) KM		KM
Odometer reading on DEPAR	TURE: (from school)	KM
TOTAL Kilometers Travelled:	(return minus departure)	KM
<u>Did you drive an AM route?</u> <u>Did you drive a PM route?</u>		
Yes No	Yes	No
		Maintenance & Repairs
Bus Driver Signature	Date	
TO BE COMPLETED BY PRINCIPAL:		
No. of Students Transp	portod	Grade(s):
		` '
Trip Category - If category is not complete and the		_
Sport PlayDivisionalZone		Exhibition
Other School Presentation	Practical Arts	Field Trip
Supervising Teacher Signature		Approved by Principal
MECHANIC'S STATEMENT		
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This box is to be completed by the attending mechare defined as repairs required to keep the bus on six month inspections, oil changes, and repairs the scheduled oil change.	the road and legal for transporti	ing students. Regular maintenance includes
	Work done on the bus w	vas:
Mechanic's Signature	Emergency Repairs	Regular Maintenance
DIVISION OFFICE APPROVAL		
	Secretary Treasurer	Transportation Supervisor