

Requesting School EHS Organization/Team/Class Girls' Basketball  
 Date(s) of Trip 12/26/22-12/30/22 Destination Orlando, FL  
 Number of Buses Required 0 Teacher(s)/Sponsor(s) in Charge Donnie Swiney  
 Time of Departure TBA Time of Return (by 2:00 pm on school day) TBA  
 Fund Responsible for Payment Girls' Basketball Boosters  
 Will you stop for lunch? **YES** NO If "YES", where? TBA  
 Do you need storage? **YES** NO

### TRANSPORTATION - DRIVER'S REPORT

Driver Assigned \_\_\_\_\_ Bus Number \_\_\_\_\_

Odometer Reading	
End of Trip	_____
Start of Trip	_____
Total Miles	_____

Time of Trip	
Time Started	_____
Time Ended	_____
Total Time	_____

Please Check:	
_____	In City
_____	Out of County
_____	Dropped and Returned
_____	Dropped - Waited - Returned

Number of students transported	_____
Number of adults transported	_____

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

Director of Transportation Signature \_\_\_\_\_ Date \_\_\_\_\_

### CENTRAL OFFICE ONLY

Amount Paid Driver \$ \_\_\_\_\_ Date \_\_\_\_\_

### RELATED PROCEDURES:

09.36 AP.211

Review/Revised: 7/18/16