

**REPORT OF EXTRA TRANSPORTATION**

**ACTIVITY & YELLOW BUS**

Trip# \_\_\_\_\_ Date of Trip: \_\_\_\_\_

School/Organization Served: \_\_\_\_\_

Teacher(s)/Personnel In Charge: \_\_\_\_\_ Grade: \_\_\_\_\_

Driver Assigned: \_\_\_\_\_

Destination of Trip: \_\_\_\_\_

Bus# \_\_\_\_\_ Speedometer Reading: Ending: \_\_\_\_\_

Beginning: \_\_\_\_\_

Driver Signature: \_\_\_\_\_ SS# \_\_\_\_\_

Driver Per Hour Rate: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_  
(If teacher assistant was used, mark "N/A" above) (RATE) X (HOURS) = (TOTAL BASE PAY)

Principal's Signature: \_\_\_\_\_

\*If a Teacher Assistant/Custodian was used to drive, please indicate by marking "N/A" Below

Date	Trip #	Time In	Time Out	Total Hours	Authorized Signature

**\*\* COMPLETE AND RETURN THIS FORM TO THE TRANSPORTATION DEPARTMENT.**  
If driver is to be paid, please complete the Supplement form for Bus Driver, Field Trips.

