

TURTLE MOUNTAIN SCHOOL DIVISION 6 – G.B

TRIP REPORT

Date: \_\_\_\_\_ Destination: \_\_\_\_\_

Bus Driver: \_\_\_\_\_ (Please print)

Supervising Teachers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please report on the following as applicable:

1) Student Ridership \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2) Teacher/Adult Supervision \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3) Vehicle Defects \_\_\_\_\_  
\_\_\_\_\_

4) Other concerns \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OR

Satisfactory Trip

Bus Driver \_\_\_\_\_

Transportation Coordinator \_\_\_\_\_

Secretary-Treasurer \_\_\_\_\_