<u>REQUISITION FOR SCHOOL BUS – OUTSIDE GROUPS</u>

Date:		
Name of Group:		
Date and Time of Departure		
Destination:	Purpose:	
Driver Requested (Yes):		
Name of Group Coordinator:		
Charge to: (Mailing Address):		
	Requested by:	
	Approved by:	
	Administrator:	
TO BE COMPLETED BY DRIVER		
Date of Trip:	Destination:	
Time of Departure:		
Odometer Ending		
Odometer Start:		
Distance:k.m.		
	Driver:	
	Supervisor:	
RETURN TO THE DIVISION OFFICE		
Number of Hours	@	
Number of Meals	@	
Number of Hours Overtime	@	
Mileage to Driver	@	
Charged to:		
Calculated by:	Total Bus Driver Salary	
	Costs of Replacement Driver (if any)	
	Total Benefits	
	Mileage Charges	
	Base Bus Fees	\$75.00
	TOTAL CHARGE	