



# Glen Rose School District School Bus Request Form

Circle one: Regular/Short

Bus driver needed: Yes/No

Date Needed: \_\_\_\_\_

Bus pick up time: \_\_\_\_\_ Bus drop off time: \_\_\_\_\_

Number of individuals to transport: \_\_\_\_\_

Of those, how many are students: \_\_\_\_\_

Reason for use: \_\_\_\_\_

Club/Organization: \_\_\_\_\_

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

Sponsor and principal agree to provide seating chart to bus driver, directions to destination and ensure the bus is thoroughly cleaned upon arrival back on campus.

Requestor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Starting mileage: \_\_\_\_\_ Ending mileage: \_\_\_\_\_

Bus Driver Name: \_\_\_\_\_ Bus #: \_\_\_\_\_

Actual departure time: \_\_\_\_\_ am/pm Actual arrival time: \_\_\_\_\_ am/pm