



NORTHERN GATEWAY SCHOOLS

4104 Kepler Street, Whitecourt, AB T7S 1M8

APPLICATION FOR USE OF DIVISION BUSES

2013-2014 School Year

TRANSPORTATION FAX 780-524-4256

Please send copy to the Director of Transportation and a signed/approved copy will be returned to the school. A copy must be carried in the school bus for Highway Traffic Regulations.

TRANSPORTATION INFORMATION

School: Fox Creek School Fax: 780-622-3482 Phone: 780-622-3742
of Buses: _____ Number of People: _____ Estimated Total Kilometers: _____
Date Required: _____ Time Out: _____ Time Returned: TBD
Destination: Percy Baxter School (Whitecourt)
Name of Driver: Crystal McPhee (Drivers must be approved by the Transportation Director)
(Check one) Volunteered Driver _____ Driver paid by School _____ Driver paid by Transportation _____

DESCRIPTION OF TRIP AND ACTIVITY

Purpose of Trip: _____
Name(s) of Teacher(s) requesting approval: _____
Name(s) of Trip Supervisor(s): _____
Name(s) of non-divisional personnel riding on the bus: Mike Pasula

AUTHORIZATIONS

Principal: _____ Date: _____
Transportation Director: _____ Date: _____
(Please report any cancellations or changes in dates to the Director of Transportation)

TRIP REPORT

School/Group: _____ Driver: _____
Date: _____ Destination: _____

ODOMETER READING:

UNIT#: _____ START: _____ END: _____ Total Distance: _____ KM

DRIVERS LOG:

Day 1 Start Time: _____ Day 2 Start Time: _____ Day 3 Start Time: _____
Day 1 End Time: _____ Day 2 End Time: _____ Day 3 End Time: _____

Driver's Signature: _____ Date: _____

FOR TRANSPORTATION OFFICE USE ONLY

Amount: \$ _____ Date: _____

PLEASE RETURN COMPLETED TRIP FORMS ALONG WITH PRE-TRIP INSPECTION FORMS TO THE TRANSPORTATION OFFICE IMMEDIATELY UPON COMPLETION OF TRIP

24 hr. transp. emergency call: 1-780-524-8331