

20__ - 20__ SCHOOL SESSION

JEFFERSON PARISH SCHOOLS TRANSPORTATION DEPARTMENT DAILY TRIP SHEET

Please fill in complete information as to location of stops in numerical order, number of students at each stop, time of arrival at each stop and odometer reading. A copy must be kept **on the bus at ALL times**. Give a copy to the principal and send a copy to the Transportation Department. Whenever a stop is changed, you must submit a revised Trip Sheet, indicating only the corrected stop and changes for that stop. If school assignments and/or entire routes are changed, unless otherwise instructed, you must submit a complete Trip Sheet indicating the changes. A map of your route(s) must also be kept on the bus. If you have more than 10 stop locations, please list the additional stops on Daily Trip Sheet - 10 or More Stops form.

NOTE: PLEASE PLACE A STAR (*) BESIDE STOP LOCATIONS THAT ARE SUBJECT TO FLOODING.

Name of Driver: _____ Bus Number: _____

Name of School: _____ Does this sheet match your route in Versatran?
 Yes No

“Buddy System”

DESCRIPTION OF ROUTE

Driver: _____

AM Trip No.: _____ **Time Trip Begins:** _____ **Time Trip Ends:** _____

STOP #	LOCATION	NO. OF STUDENTS	TIME	ODOMETER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
Mileage Reading Upon Arrival at School in AM				

PM Trip No.: _____ **Time Trip Begins:** _____ **Time Trip Ends:** _____

STOP #	LOCATION	NO. OF STUDENTS	TIME	ODOMETER
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Copies To: Transportation Department School Driver