2019-2020 School Vehicle Substitute Drivers

I would like to have the following individual(s) approved as substitute bus and/or van drivers for the 2019-2020 school year:

Name	Address	Phone

I hereby certify that I will not use any substitute until all their credentials are on file with the Transportation Office of the Tuscarora School District.

_____
Contractor

_____
Date

Please return to the Transportation office prior to the start of school for approval of the TSD Board of Directors <u>and</u> as needed throughout the course of the school year.