

Athletic/Field Trip Report

GREENE COUNTY SCHOOLS

School: _____ Date Submitted: _____

Date	Bus Driver	Destination	Hourly Charge (Hours X Rate)	Mileage Charge (Miles X .50/Mile)	TOTAL COST [CO Use Only]

Please complete form for all athletic and field trips monthly and submit on the **30th** of each month to the classified payroll clerk.

NOTE : This form should be completed in **addition to** the bus driver's online time sheet.



*Building our future -
One child at a time*