

GUSTINE UNIFIED SCHOOL DISTRICT
Transportation Office
1500 Meredith Ave
Gustine, Ca 95322
(209)854-2607

EXPEDITION TRANSPORTATION REQUEST

SCHOOL EMPLOYEE'S NAME _____

SCHOOL _____ DATE _____

EXPEDITION REQUESTED #1 _____ #2 _____

DATE(S) NEEDED _____ / _____ / _____ TO: _____ / _____ / _____

APPROXIMATE MILES _____ NUMBER OF STUDENTS _____

7 OR LESS

TIME OF DEPARTURE _____ ARRIVAL HOME _____

DESTINATION: _____

PURPOSE OF TRIP: _____

FUNDING SOURCE FOR FUEL _____

(EX. ASB, SPORTS, ECT.)

REQUEST WILL BE KICKED BACK IF FUNDING SOURCE IS NOT FILLED IN

YOUR REQUEST TO USE A SCHOOL VEHICLE HAS BEEN

_____ APPROVED _____ DENIED _____

PRINCIPAL SIGNATURE

A SCHOOL VEHICLE HAS BEEN RESERVED FOR YOUR USE

TRANSPORTATION SUPERVISOR

**PLEASE NOTE: RETURN EXPEDITION WITH A FULL TANK OF GAS AND
CLEAN INTERIOR OF YOUR GARBAGE AND BELONGINGS.**

NAME OF DRIVER _____ I agree to terms of use _____

Initial

EXPEDITION # _____

ODOMETER READING _____ / _____
BEGINNING ENDING

GALLONS OF GAS USED _____

NOTE ANY REPAIRS NEEDED _____

FILL OUT COMPLETELY See terms of use on back

Terms of Use Agreement for Expeditions

As the adult in charge:

I will not allow passengers to eat or drink in the vehicle.

I will not allow students to be destructive.

I will fold up the second seat to allow rear passengers to get in and out.

I will ensure that all passengers wear their seat belts.

I will abide by all traffic rules and regulations.

I will check to be sure my group has removed all their belonging and garbage at the end of the day.

I will return the vehicle with a full tank of gas to the high school.

I understand that I will be held responsible for any damage caused by students under my supervision.

I will return the keys and gas card to the District office the next business day.

I, _____
agree to the terms of use as the Driver and Adult in charge.