

**ELIZABETH CITY - PASQUOTANK COUNTY PUBLIC SCHOOLS  
YELLOW SCHOOL BUS - EXTRA TRANSPORTATION**

To be completed after field trip and returned to the Bus Garage

**DATE OF TRIP:**

**SCHOOL SUBMITTING REQUEST:**

**DESTINATION:**

| BUS NUMBER | DRIVERS NAME | BEGINNING MILAGE | ENDING MILAGE | TOTAL MILAGE |
|------------|--------------|------------------|---------------|--------------|
|            |              |                  |               |              |
|            |              |                  |               |              |

**APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PLEASE CHECK WITH THE BUS GARAGE  
FOR  
PRIOR APPROVAL**

