

Alachua County Public Schools
Transportation Department

Extra Driving Time – One Week Only

Driver: _____ Bus No: _____ Employee No: _____

Date	Route Covered/Description	Starting Time	Ending Time	Total Hours	Do Not Write In This Column
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Note: Driver must fill out form completely. Use a form for each week (do not combine weeks). Please turn form in at the end of each week.

FOR ONE WEEK ONLY