CHARTER BUS DRIVER EVALUATION FORM

Please fill out the following information and send it immediately to Purchasing to verify invoicing of time/miles. The Driver’s and the District Representative’s signatures are imperative. In case of emergency, late arrival, etc. call:

Pacific Coachways @ (714)892-5000

Purchasing should also be notified IMMEDIATELY of any EMERGENCY 949-582-4680 or

Sam Hamblen at (949)582-4375

Date: _______________________

Destination: ______________________________

Departure Time: _____________________  Return Time: ___________________

Total time of excursion shown to the next 1/4 hour (example: 5:03 would be 5:15)

Odometer Readings:

Upon Return: ______________________

Prior to Departure: ______________________

Total Miles of Trip: ______________________

Remarks:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signature of Driver: _______________________

Tour Guide/Instructor Signature: _______________________

White copy: SOCCCD Purchasing

Yellow copy: Bus Driver

(revised 1/99)