

HANKINSON PUBLIC SCHOOL

415 1st Avenue SE P.O. Box 220 Hankinson, ND 58041 Phone: 701.242.7516 Fax: 701.242.7434 www.hankinsonschool.com

Bus/Mini-Bus/Vehicle Use Agreement

Date(s) requested		
Organization:		Driver:
Vehicle:		Capacity:
reimbursement rate per mile w	ill be paid to the H to have an insuran	ve-named organization. The state mileage Iankinson School District at the end of the usage. ce rider on the bus/vehicle, which is to be presented
clean driving record. Student	s are not allowe	we a Class 1 or Class 2 license for buses, and have a ed to drive the school vehicles. The sible for making the adults involved in the usage
The Vehicle issued will be wash in the same condition. Vehicle		illed with gas and oil. The Vehicle is to be returned after every trip.
Interior will be checked prior to issuance. It is expected that the vehicle be returned in the same condition. The cost of repairs will be charged to the organization using the vehicle.		
The capacity of the vehicle must never be exceeded.		
Upon completion of the usage, the organization is expected to submit a list of all trips taken, including dates, destination, mileage, name of driver and number of students transported on said trip.		
Sign and return 1 copy of this policy to the Superintendent's office.		
Date:	Signature: _	
The Hankinson Public School District reserves the right to deny request.		
Below to be filled out by School		
Approved1	Not Approved	Signature: