

CONTRACT NAME: AGREEMENT BETWEEN WASHINGTON UNIFIED SCHOOL DISTRICT AND DAVIS JOINT UNIFIED SCHOOL DISTRICT

BRIEF DESCRIPTION OF CONTRACT: This agreement between WUSD and DJUSD is for three busses to shuttle all DaVinci Charter Academy students and staff to the Veteran's Memorial Center for the annual Winter Feast.

FISCAL IMPACT: The cost of the transportation is included in the site budget.

PLEASE PRINT VERY FIRM

WASHINGTON UNIFIED SCHOOL DISTRICT
Transportation Request

SCHOOL Da Vinci Charter Academy **DEPT./GRADE** 10-12 **DATE** 6 Nov 2017

DESTINATION/ADDRESS Veterans Memorial Center, 203 We. 14th St., Davis, CA 95616

NUMBER OF STUDENTS 300 **NUMBER OF ADULTS** 30 **NUMBER OF BUSES** 3

9:15 A.M. @ Da Vinci High School N/A Friday, 8 December 2017
ARRIVAL TIME AT SCHOOL **RETURN TIME TO SCHOOL** **TRIP DATE/DAY**

BUDGET CODE 09-300-529-9010-0-1110-1000-5830-4419

FOR CATEGORICAL PROGRAMS ONLY: This expenditure is related to the funding source, _____

Gretchen Conners [Signature] 11/6/17
TEACHER'S NAME **SITE ADMINISTRATOR'S SIGNATURE/DATE**

DISTRICT APPROVAL (CATEGORIAL/OTHER) _____ **TRANSPORTATION APPROVAL** _____

ADDITIONAL REQUESTER INFORMATION
Per submitted quote, approval is for 3 buses to shuttle all students/staff from Da Vinci HS to VMC. Return trip not needed
School will be dismissed from VMC. Event is Winter Feast.

TRIP EMERGENCY PROCEDURE VERIFICATION

STARTING TIME _____ **ENDING TIME** _____

DRIVER: _____ **BUS NUMBER** _____

MILEAGE OUT: _____ **MILEAGE IN:** _____ **TOTAL** _____

TIME DEPART YARD _____ **TIME ARRIVED AT DESTINATION** _____

TIME LEFT DESTINATION _____ **TIME RETURNED TO YARD** _____

TRIP COMPLETED _____

.....
DRIVER'S SIGNATURE _____ **DATE** _____
.....
(OFFICE USE ONLY)

MILEAGE CHARGE _____ **RATE** _____ **COST** _____

DRIVING HOURS _____ **RATE** _____ **COST** _____

OVERTIME _____ **RATE** _____ **COST** _____

TOTAL _____