

# Transportation Permit/Travel Certificate

“Ensuring all students learn and grow is our collective responsibility”

Heath City Schools  
107 Lancaster Drive  
Heath, Ohio 43056

Transportation Office: (740) 238-7111  
Bus Garage: (740) 238-7055

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This is to certify that permission has been granted for the vehicle designated below to make the trip on the date listed. This trip is in compliance with the rules and regulations of the Ohio Department of Education and the Board of Education.

Date of Trip: \_\_\_\_\_

Group/Organization: \_\_\_\_\_

Activity: \_\_\_\_\_

Teacher/Coach/Advisor: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Pick-up Location: \_\_\_\_\_

Number of Vehicles: \_\_\_\_\_ Van(s) \_\_\_\_\_ Bus(es)      Number of Passengers: \_\_\_\_\_

Destination: \_\_\_\_\_

Destination Address: \_\_\_\_\_

Stop to Eat: \_\_\_\_\_ Restaurant Locations: \_\_\_\_\_

Departure Time: \_\_\_\_\_ Activity Start Time: \_\_\_\_\_ Return Time: \_\_\_\_\_

**(For after-school activities, departure times before 4:45 pm can not be guaranteed.)**

Special Needs/Instructions/Directions:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Administrator: \_\_\_\_\_

Transportation Director: \_\_\_\_\_

School Vehicle Number: \_\_\_\_\_ Driver Assigned: \_\_\_\_\_

Drivers Signature: \_\_\_\_\_

**Please Return This Trip Ticket After Your Trip**

Please fill in all information below. Regulations and certificates recommended by the State Department of Education-concurred by the Interstate Commerce Commission; Public Utilities Commission; Bureau of Motor Vehicles; and the State Highway Patrol.

The pre-trip inspection was completed, as required. Yes: \_\_\_\_\_ No: \_\_\_\_\_

The pre-trip safety briefing was conducted, as required. Yes: \_\_\_\_\_ No: \_\_\_\_\_

The emergency evacuation briefing was conducted, as required. Yes: \_\_\_\_\_ No: \_\_\_\_\_

Mileage	Trip Time	Payroll Time
Ending: _____	Ending: _____	Ending: _____
Beginning: _____	Beginning: _____	Beginning: _____
Total: _____	Total: _____	Total: _____

The post-trip inspection was completed, as required. Yes: \_\_\_\_\_ No: \_\_\_\_\_

Comments (If any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Drivers Signature: \_\_\_\_\_