

Sanford Public Schools

Student's Name		School	Date of Incident
Bus Number	A.M. Trip	P.M. Trip	Driver's Name

Dear Parents:

Sanford Public School students who are dependent on bus transportation are subject to regulations until they get off at their school or the bus stop near their home.

Any misbehavior which detracts from the driver's prime function is most dangerous and jeopardizes the safety of all passengers.

Part A: To Be Completed By Driver  
 (Note to driver: Entire Report is to be returned to York Lines)

Your child has been cited for an infraction of the rules checked below:

- |  |   |
|--|---|
| <input type="checkbox"/> Unacceptable language       | <input type="checkbox"/> Throwing objects inside of bus                 |
| <input type="checkbox"/> Failure to remain seated    | <input type="checkbox"/> Tampering with bus equipment                   |
| <input type="checkbox"/> Refusing to obey driver     | <input type="checkbox"/> Hanging out of window                          |
| <input type="checkbox"/> Fighting                    | <input type="checkbox"/> Spitting                                       |
| <input type="checkbox"/> Lighting matches            | <input type="checkbox"/> Annoying others<br>(comment necessary)         |
| <input type="checkbox"/> Smoking on bus              | <input type="checkbox"/> Destruction of property<br>(comment necessary) |
| <input type="checkbox"/> Throwing objects out of bus | <input type="checkbox"/> Other (comment necessary)                      |

Comment: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Driver's action prior to submitting this report: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Driver's Signature Date

Part B: To Be Completed By School Administrator

- Reported First Offense       Reported Second Offense       Reported Third Offense

Administrator's Action: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 Administrator's Signature Date

