CARPOOL LOG

Student(s) Name(s)

_____ _____

_____ _____

_____ _____

Teacher(s) Name(s) _____ **Grade(s)** _____

Driver(s) Name(s)

_____ _____

_____ _____

_____ _____

START DATE: _____ **END DATE:** _____

_____ _____
Signature of Parent or Guardian **Date**

_____ _____
Signature of Parent or Guardian **Date**

_____ _____
Signature of Parent or Guardian **Date**

Comments: _____

_____

_____

Parents: Please note that dismissal time for any student participating in a carpool is 2:55 p.m.-3:05 p.m.