



# MUHLENBERG SCHOOL DISTRICT TRANSPORTATION

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### ***Van Request Form***

Complete this form to request use of Muhl SD vans  
Please contact Erica Brumbach with any questions.

**Date of trip:** \_\_\_\_\_ **School:** \_\_\_\_\_ **Destination:** \_\_\_\_\_

**Departure time:** \_\_\_\_\_ **Return time:** \_\_\_\_\_ **Group:** \_\_\_\_\_

**Number of riders:** \_\_\_\_\_ **Name of Driver(s) (for a van):** \_\_\_\_\_

**Type of vehicle requested (circle one):**           ★ Van                           ★ Trailer

#### ***THIS SECTION COMPLETED BY TRANSPORTATION DEPARTMENT***

**Date received:** \_\_\_\_\_ **Penn DOT approved driver: Yes:** \_\_\_\_\_ **No:** \_\_\_\_\_

**Received by:** \_\_\_\_\_

**Assigned vehicle:** M-8    M-9    M-11 (7 passenger)    M-12    M-13 TRAILER

### **MUHLENBERG SCHOOL DISTRICT Buildings/Grounds/Transportation**

**Instructions for Vehicle Use:**

- Drivers must be on the approved driver list with Muhlenberg School District
- Drivers are responsible for pick up and drop off of keys
  - Vehicles are to be returned to the Administration/Middle School parking lot. After hours please return keys to the Administration drop box located on the rear entrance of the Administration building.
- Be sure to fill out this form completely.
- The gas reading should be recorded at the end of the trip.

***PLEASE CLEAN UP AND EMPTY ALL TRASH OUT OF THE VEHICLE UPON YOUR RETURN.***

**Mileage:** Start: \_\_\_\_\_ Return: \_\_\_\_\_ Total Miles: \_\_\_\_\_

**Gas Gauge:** (Circle one) E    ¼    ½    ¾    F

**Van #** \_\_\_\_\_

**Group:** \_\_\_\_\_ **Destination:** \_\_\_\_\_

**Print Driver's Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_

***MAKE SURE ALL LIGHTS ON THE VANS ARE TURNED OFF!!!***

**Notes/Comments:** \_\_\_\_\_



801 Bellevue Avenue, Reading, Pennsylvania 19605-1799



It is the policy of the Muhlenberg School District not to discriminate on the basis of gender, disability, race, color, and national origin in its educational programs, activities, or employment policies as required by Title IX of the 1972 Educational Amendments. Inquiries regarding compliance with Title IX should be directed to the Assistant Superintendent (see above) or to the director of the Office for Civil Rights. Department of Health, Education, and Welfare. Washington. DC