

## Wasatch County School District Field Trip and Athletic Trip Evaluation

Type of Trip \_\_\_\_\_

Location/Destination \_\_\_\_\_

Date \_\_\_\_\_

- |   | Yes   | No    |
|---|-------|-------|
| 1. Was the departure and arrival on time? | _____ | _____ |
| 2. Was supervision satisfactory?          | _____ | _____ |
| 3. Did the bus arrive and leave clean     | _____ | _____ |
| 4. Comments and safety concerns:          |       |       |

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

Supervisor's Signature \_\_\_\_\_