Time Sheet – Extra Runs
Hall County Schools

Name: ________________________________ **Bus #:** ______ **Month:** _______ **Year:** ______ **Sheet:** ___ of ___

	Early Morning Run AM Route:			PM Route:			Mid-Days/Extra Runs Extra Time:			
DATE	**Start Time**	**End Time**	**Total Time**	**Start Time**	**End Time**	**Total Time**	**Start Time**	**End Time**	**Total Time**	**REASON**
Office Use Only:	Total AM Hours: __________				Total PM Hours: __________			Total Mid-Day Hours: __________		Grand Total Hours: _____

- **List below the normal times for your regular route (not including any extra runs, etc).**
- **Extra run time should not be during your normal route times.**
- **If you double for someone else and it adds time to your route or runs, list the extra time in the extra run section above and explain.**
- **Time for Mid-day runs and early morning runs starts when the driver leaves home.**

AM Route: Start Time: _______________ End Time: _______________
PM Route: Start Time: _______________ End Time: _______________