

**APPLICATION FOR REIMBURSEMENT FOR WITNESS OF SCHOOL BUS
VIOLATIONS PROVIDED UNDER TITLE 21 DEL. CODE §4166, TITLE 14 DEL.
CODE §4112, AND TITLE 11 DEL. CODE §602, §822 AND §1301. OTHER OFFENSES
MAY BE PROVIDED FOR UPON AUTHORIZATION OF STATE SUPERVISOR FOR
PUPIL TRANSPORTATION.**

A. To be completed by school bus driver:

I, _____ of _____,
Print full name Print complete mailing address

Social Security Number: _____ certify that the information below is correct and true to the best of my knowledge.

Phone Number Date Signature

School District Served: _____ Employer: _____

Employer ID No. _____

B. Time Involved:

Case Preparation with Attorney:

Date: ____/____/____ Time: ____/____ Place: _____
MO DA YR HR MIN

Travel Time for Case Preparation:

Date: ____/____/____ Time: ____/____ Place: _____
MO DA YR HR MIN

Court Action:

Date: ____/____/____ Time: ____/____ Place: _____
MO DA YR HR MIN

Travel Time for Court Action:

Date: ____/____/____ Time: ____/____ Place: _____
MO DA YR HR MIN

Total time involved for case preparation and court action: ____/____
Hr Min

C. Case Identification: Disposition: _____
Case Name/Number: _____ Court Location: _____
Presiding Judge: _____ Accused Violator: _____
Signature of Prosecuting Attorney: _____
Office Address: _____

D. Mileage Allowance:
Total miles traveled to and from court and/or preparation: _____ miles.

E. To be completed by employer:

Hourly Rate:

Normal hourly rate of pay as School Bus Driver: \$ _____

Employee Costs: \$ _____

Total Hourly Rate: \$ _____

Signature of Employer: _____

Employer Mailing Address: _____

Federal Employment No. _____

To be completed by the School Transportation Supervisor:

Total Time: _____ / _____ x _____ = \$ _____
 HRS MIN TOT. HOURLY RATE

Total Distance: _____ x _____ = \$ _____

Total Due = \$ _____

The payment shown in the area above will be paid to the employee for time spent in preparation and court action plus travel allowances.

**INSTRUCTIONS FOR COMPLETING THE
APPLICATION FOR REIMBURSEMENT FORM**

- A. The school bus driver is required to complete each applicable space in sections A,B, and D on the following page. Section C is to be completed by the prosecuting attorney.

Payment is contingent upon a printed name, complete mailing address, social security number, phone number, date and signature.

Indicate the name of the school district in which you drive a school bus, and the name of your employer (contractor or district name).

- B. To be completed by the school bus driver:

TIME INVOLVED:

Case Preparation: If case preparation is required by the attorney, show the time involved by the nearest 15 minute interval. (Example: 1 hr./15 min.).

Travel Time: Time involved going to and from location or preparation to nearest 15 minutes.

Court Action: Time spent in court shown by the nearest 15 minute interval. (Example: 1hr/15 min.)

Travel Time: Time involved going to and from court location.

- C. To be completed by the prosecuting attorney:

IDENTIFICATION OF CASE:

Show the name or number assigned by the court to the case involved. Show the town or city location of the court.

- D. To be completed by the school bus driver:

Mileage: Show total miles traveled to and from court and/or preparation.

- E. To be completed by the employer.

Hourly Rate: Show hourly rate of pay of school bus driver plus employee costs such as social security, workmen's compensation, etc. signature of employer and mailing address.

The completed form must be presented to the school transportation supervisor of the district served by the driver who will submit it to the Transportation Section of the State Department of Education where payment will be made to the driver involved.

Questions regarding the completion of this form should be directed to the local transportation supervisor and/or the State Supervisor of School Transportation.