



YISD TRANSPORTATION DEPARTMENT

7944 YERMOLAND DR. EL PASO, TX 79907

(915)434-1740- Main (915)434-1744- Direct

SPONSOR'S RESPONSIBILITIES AND PROCEDURES ON MCI TRIPS 2018-19

1. Sponsors are responsible for the student(s) behavior on the trip.
- _____ 2. Any damage done to the bus by a passenger may result in a charge to **the school, organization or the student's parents.** *
3. Any trash should be deposited in the waste basket in the front of the bus or in the trash bin at the back of the bus located next to the restroom.
- _____ 4. **Extra charges will be assessed and charged for cleaning of the bus if it is not left in the same condition as when boarded.** * (i.e. White Sands)
5. Cans, plastic bottles, paper towels, whole toilet paper rolls or any other objects are not to be deposited into the commode. **(PLEASE DO NOT BRING YOUR OWN TOILET PAPER, MCI COMMODES REQUIRE A SPECIAL TYPE.)**
6. Restroom is to be used by passengers and drivers only, unless authorized by the driver.
7. Camera flashes are prohibited at night, as they may blind the driver, causing a safety hazard.
8. MP3, iPods and/or music devices are permitted for use on the bus, only with headphones.
- _____ 9. For Passengers safety, standing or walking in the isle is not allowed while the bus is in motion. (TEA Code Sec. 34.004).
10. Loud noises or distracting the driver will not be permitted. *
- _____ 11. For safety reasons, ice chests or any other article will not be allowed in the center aisle of the bus. The isle must be kept clear at all times. (TEA Code, Student Handbook) *
- _____ 12. Campus will provide extra water for the said trip/group, in case of an emergency. (i.e. bus break downs in hot weather)*
13. No smoking (including E-cigarettes) or consumption of alcohol is allowed on the bus at any time. Possession of tobacco, alcohol and/or non-prescribed drugs prohibited at all times.
14. At the end of each trip, the sponsor and/or coach must stay until all passengers are unloaded and have departed the bus.
- _____ 15. **While at the destination city, sponsors are responsible for the driver's room accommodations.** If staying in a hotel and the departure time to return back to El Paso is going to be in the evening, for safety purposes, we ask the sponsors/coach to make arrangements to keep the driver's room(s) the latest possible.*
- _____ 16. Drivers are required to adhere to Federal Motor Carrier Safety Regulations (§395 15 Hour rule), which is in place to ensure a Driver is fully rested and does not exceed the "15 hours on duty rule" (5 hours on duty time + 10 hours driving time + 1 hour pre/post inspection + 8 continuous, uninterrupted, hours of rest = 24 hours).* Schedules or events that arise which require a Driver to deviate from this regulation, may result in an additional Driver(s) sent out to ensure compliance of this law. Please plan your itinerary accordingly. *
- _____ 17. Sponsors are to submit an itinerary with their formal MCI request form for your request to be processed. *
- _____ 18. All **NON YISD** passengers other than students or staff must be approved by the campus (i.e. - chaperons, family). No passengers requiring a car seat. No student is to be left in the care or custody of the driver. *
- _____ 19. **Any Toll Roads used will be the responsibility of the Sponsor/ Campus and must be paid at time of use. If not paid, a bill may be received and will be forwarded to the Campus. These may include additional fees such as late fees.** *
20. **We are not responsible for any items left in the bus.**

Thank you for your interest in the MCI Program. This will be your "official estimated quote". For School(s) _____
 _____ Passengers, _____, going to: _____ (destination) on _____ (date), returning: _____
 (date), with a departure time of: _____ and an estimated departure time from destination of _____, will be _____ Hours X
 \$17.50 + _____ Miles X \$1.00 + *** _____ Other X \$1.00 Equals = (per bus) \$ _____ X _____ (buses) = \$ _____.

Please keep in mind the actual charges will be billed.



****Please sign and fax or email back along with your formal request. ****

Cell (optional) – (____) _____

Sponsor's Signature

Print Name

Date

434-
Extension #\

***- Initials Required** - For Questions please call MCI Clerk at 434-1744