Billing Invoice – School Bus Driver Re-Training by Certified Delaware Trainer

Name of School Bus Driver Trained:
Employer of School Bus Driver Trained:

This invoice is for Delaware CDSBDT to submit for training licensed Delaware School Bus Drivers in any of the following areas. **You can only submit for one training area per invoice.**

Proper Mirror Set-Up Training (Using Mirror Grid Training)	
Date School Bus Driver was trained on proper Mirror Set-Up	**Date of Training:**
Amount Owed to Trainer for Mirror Training $26.27	**TOTAL AMOUNT DUE:**

Air Brake Restriction Removal Training for licensed School Bus Driver	
Date(s) School Bus Driver was trained for the skills required to pass an air brake restriction removal test.	**Dates of Training:**
Amount Owed to Trainer for Air Brake Restriction $157.62	**TOTAL AMOUNT DUE:**

Post-Accident Training for School Bus Driver		
Date(s) School Bus Driver received post-accident re-training.	**Dates of Training**	
	Number of Hours (12 Hours Max)	
Hourly Rate Owed to Trainer for Post-Accident = $26.27	**TOTAL AMOUNT DUE (Hours x Hourly Rate)**	

Certified Trainer Name: (print):	
Certified Trainer Employer:	
Signature of Certified Driver Trainer:	
Date of Submission:	

Please return this form to your district transportation supervisor upon completion of training. The supervisor will sign and forward it to DDOE.

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DISTRICT TRANSPORTATION SUPERVISOR Signature **DATE**

Updated 7/1/2026