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|  Policy #: T-8 | Effective Date: 4/27/04 | Page #: 1 of 2 |
| Ref #: | Policy Council Approval Date: 8/28/07 | Revision Date: 4/10/07, |

COMPONENT: TRANSPORTATION

SUBJECT: PRE-TRIP INSPECTION

PERFORMANCE OBJECTIVE: To ensure all vehicles have a safety check prior to operating and transporting children on board.

Staff must conduct a thorough pre-trip inspection before and after each final route. The most important purpose of a pre-trip inspection is to ensure the vehicle used to transport children is operating in a safe manner.

Pre-Trip procedures should include:

- | | |
|--|--|
| 1. Check all mirrors. | Complete: The drivers name |
| 2. Check tailpipe. | Complete: The bus # |
| 3. All exits open and close easily. | Complete: Center name |
| 4. Tires ok? Lug nuts? Tires tread ok? | Complete: The date for the week (ex: March 1-5) |
| 5. Look under bus all clear? | Place a <input checked="" type="checkbox"/> if items are ok. |
| 6. Outside of bus clean? | Place an <input type="checkbox"/> if items need attention. |
| 7. Inside bus clean? | |
| 8. Emergency equipment on bus with signs? | |
| 9. Windshield clean? | |
| 10. Gauges ok? | |
| 11. Start engine, look and listen for trouble. | |
| 12. Step light working? | |
| 13. Steering ok? Noise? | |
| 14. Horn, defroster, heater, windshield wipers work? | |
| 15. Brakes feel ok? Parking brake release reset? | |
| 16. Turn signals, flashers all working and clean? | |
| 17. Stop arm working? | |
| 18. Headlights working? | |
| 19. Hazard flashers working? | |
| 20. Brakes stop and hold? | |

Complete odometer readings for the beginning of the week reading.

Write additional comments on the pre-trip form. If the bus needs service there must be a vehicle repair log attached to the pre-trip inspection form. **Do not write service request on pre-trip inspection form without completing a vehicle repair log.**

The service record on the pre-trip inspection form must be complete and current.



Pre-Trip Inspection

DRIVER: _____ BUS#: _____ CENTER: _____ DATE: _____

√ = ok X = needs attention ODOMETER BEGIN: _____ END: _____

| ITEMS TO CHECK | Mon AM | Mon PM | Tues AM | Tues PM | Wed AM | Wed PM | Thurs AM | Thurs PM | Fri AM | Fri PM |
|--|--------|--------|---------|---------|--------|--------|----------|----------|--------|--------|
| 1. Check all mirrors | | | | | | | | | | |
| 2. Check tailpipe | | | | | | | | | | |
| 3. All exits open and close easily | | | | | | | | | | |
| 4. Tires ok? Lug nuts? Tires tread ok? | | | | | | | | | | |
| 5. Look under bus all clear? | | | | | | | | | | |
| 6. Outside of bus clean? | | | | | | | | | | |
| 7. Inside bus clean? | | | | | | | | | | |
| 8. Emergency equipment on bus with signs? | | | | | | | | | | |
| 9. Windshield clean? | | | | | | | | | | |
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| 15. Brakes feel ok? Parking brake release reset? | | | | | | | | | | |
| 17. Stop arm working? | | | | | | | | | | |
| 18. Headlights working? | | | | | | | | | | |
| 19. Hazard flashers working | | | | | | | | | | |
| 20. Brakes stop and hold? | | | | | | | | | | |

Service Record:

ADDITIONAL COMMENTS:

Mileage of last oil lube: _____
 Mileage of next needed oil change: _____
 Mileage of last rotation: _____
 Mileage of next tire rotation: _____
 (mileage/tire rotation should be conducted every 3,000 miles)