

SCHOOL BUS EXTRACURRICULAR PRE-TRIP INSPECTION RECORD

(Make Copies as Needed)

Date	Trip Number/ Trip Destination	Driver's Name	Trip Number →	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
			Gallons of Fuel Added															
			Quarts of Oil Added															
			Items to be Checked	D	R	D	R	D	R	D	R	D	R	D	R	D	R	D
			Engine Oil/Coolant															
			Belts, Wires, & Hoses															
			Windshield & Windows															
			Tires & Lugs															
			Exhaust System															
			Brakes & Brake Leaks															
			Park or Emer. Brake															
			Emer. Exits & Buzzer															
			Headlights/Hazard															
			Pupil Loading Lights															
			Stop/Crossing Arms															
			Steering Wheel & Horn															
			Mirrors & Adjustment															
			Emer. Equipment															
			Seats & Interior															
			Driver's Seat & Belt															
			Service Door/Entrance															
			Wipers/Washers															
			Defoster/Heaters															
			Gauges/Controls															
			Fuel Tank/Leaks															
			Springs/Shocks															
			Evacuation Drill															
			Round Trip Miles															
			Driver Initials															

D = Departure

R = Return

By initialing, I certify that I have performed a proper pre-trip inspection of this bus and have observed all official regulations.

School District _____

Bus Number _____