



Daily School Bus Inspection

Date: _____ Bus#: _____ Driver: _____

- ◆ Pre-trip section must be filled out and white copy turned in each day before leaving lot.
- ◆ Post-trip section must be filled out and yellow copy turned in at the end of each day.
- ◆ Any items needing attention should be indicated on the appropriate sheet.
- ◆ Any out-of-service items need to be brought to the Shop's attention immediately. A sub bus may need to be assigned.

Pre-Trip Odometer: _____

PRE-TRIP INSPECTION:	OK	Needs Attention		OK	Needs Attention
Oil & coolant level (check before starting bus)	<input type="checkbox"/>	<input type="checkbox"/>	Emergency exits (doors/hatches & buzzers functioning)	<input type="checkbox"/>	<input type="checkbox"/>
Bus interior/exterior	<input type="checkbox"/>	<input type="checkbox"/>	2-way radio/PA	<input type="checkbox"/>	<input type="checkbox"/>
Tires	<input type="checkbox"/>	<input type="checkbox"/>	First aid kit (secure and stocked)	<input type="checkbox"/>	<input type="checkbox"/>
Mess Kit (secure and stocked)	<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguisher (charged and secure)	<input type="checkbox"/>	<input type="checkbox"/>
Reflectors (present and secure)	<input type="checkbox"/>	<input type="checkbox"/>	Headlights (high & low beams)	<input type="checkbox"/>	<input type="checkbox"/>
Turn signals, hazards	<input type="checkbox"/>	<input type="checkbox"/>	Brake lights, back-up lights	<input type="checkbox"/>	<input type="checkbox"/>
8-way system	<input type="checkbox"/>	<input type="checkbox"/>	Glass (clean, no cracks)	<input type="checkbox"/>	<input type="checkbox"/>
Horn	<input type="checkbox"/>	<input type="checkbox"/>	Windshield wipers, washer fluid	<input type="checkbox"/>	<input type="checkbox"/>
Heaters, defrosters, fans	<input type="checkbox"/>	<input type="checkbox"/>	Mirrors (clean and adjusted)	<input type="checkbox"/>	<input type="checkbox"/>
Dash instruments (functioning)	<input type="checkbox"/>	<input type="checkbox"/>	Stop paddle/crossing arm (extend fully)	<input type="checkbox"/>	<input type="checkbox"/>
Brakes (complete brake check)	<input type="checkbox"/>	<input type="checkbox"/>	Passenger loading door	<input type="checkbox"/>	<input type="checkbox"/>
WC lift (if applicable; check operation)	<input type="checkbox"/>	<input type="checkbox"/>	Chains/sanders	<input type="checkbox"/>	<input type="checkbox"/>

Post-Trip Odometer: _____

POST-TRIP INSPECTION:	OK	Needs Attention		OK	Needs Attention
8-way system	<input type="checkbox"/>	<input type="checkbox"/>	Stop paddle/crossing arm	<input type="checkbox"/>	<input type="checkbox"/>
Headlights/clearance lights	<input type="checkbox"/>	<input type="checkbox"/>	Bus interior/exterior (clean, vandalism)	<input type="checkbox"/>	<input type="checkbox"/>
Brakes	<input type="checkbox"/>	<input type="checkbox"/>	Weekly RC	<input type="checkbox"/>	<input type="checkbox"/>

Needs Attention. Please be specific: _____