

# USD320 VEHICLE REQUEST FORM

TYPE OF VEHICLE REQUESTED (circle one):                      Car              Bus              Van

**Instructions:**

- 1: All requests **MUST BE SUBMITTED** to Transportation Department **NO LATER THAN 4PM WEDNESDAY** of the week prior to the trip.
- 2: Vehicle Requests **MUST** be approved and signed by Building Principal.

THIS SECTION TO BE COMPLETED BY TEACHER/PRINCIPAL					
Date of Trip	School	Pick-up Point	Destination		
Departure Time	Return Time	Group		Number of Riders	
Teacher/Staff Responsible	Date Submitted	Reg Ed	SPED	Athletic	
Directions/Special Instructions:					
Approved by:		Title:		Approval Date:	

THIS SECTION MUST BE COMPLETED BY DRIVER AND RETURNED TO THE TRANSPORTATION OFFICE															
<p>Driver Name: _____</p> <p>Vehicle Number: _____</p> <p>Bus Driver - Time</p> <p style="margin-left: 20px;">Start: _____</p> <p style="margin-left: 20px;">Finish: _____</p> <p style="margin-left: 20px;">Total: _____</p> <p>All Drivers: _____</p> <p style="margin-left: 20px;">Mileage: _____</p> <p style="margin-left: 40px;">Return: _____</p> <p style="margin-left: 40px;">Start: _____</p> <p style="margin-left: 20px;">Total Miles: _____</p>	<p><b>District Vehicles (Van/Cars)</b></p> <p>Picked up</p> <table style="margin-left: 20px; border: none;"> <tr> <td>Fueled?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>Clean?</td> <td>YES</td> <td>NO</td> </tr> </table> <p>Returned:</p> <table style="margin-left: 20px; border: none;"> <tr> <td>Fueled/Receipt?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>Clean?</td> <td>YES</td> <td>NO</td> </tr> </table> <p>Safety Inspection Performed (see page 2): _____</p> <p style="text-align: right;">Initials: _____</p> <p><b>Bus:</b> Copy of SPONSOR'S USE OF DISTRICT VEHICLE provided to Sponsor</p>			Fueled?	YES	NO	Clean?	YES	NO	Fueled/Receipt?	YES	NO	Clean?	YES	NO
Fueled?	YES	NO													
Clean?	YES	NO													
Fueled/Receipt?	YES	NO													
Clean?	YES	NO													
<p>_____</p> <p>Sponsor Signature</p>		<p>_____</p> <p>Date</p>													

# VEHICLE OPERATOR INSPECTION CHECKLIST

## General Appearance

- |   |     |    |                   |  |
|---|-----|----|-------------------|--|
| <input type="checkbox"/> Clean                              |     |    |                   | <input type="checkbox"/> Tires properly inflated |
| <input type="checkbox"/> No evidence of leaks under vehicle |     |    |                   | <input type="checkbox"/> Windows Clean?          |
| <input type="checkbox"/> Any Dents/Scratches?               | Yes | No | If yes, location: |  |
| <input type="checkbox"/> Windows Cracked?                   | Yes | No | If yes, location: |  |

## Vehicle Interior

- |   |     |    |                   |
|---|-----|----|-------------------|
| <input type="checkbox"/> Interior Clean?      |     |    |                   |
| <input type="checkbox"/> Ice Scraper present? |     |    |                   |
| <input type="checkbox"/> Any torn seats?      | Yes | No | If yes, location: |

## Safety Items Present?

- |  |   |
|--|---|
| <input type="checkbox"/> Triangle Kit      | <input type="checkbox"/> First Aid Kit            |
| <input type="checkbox"/> Fire Extinguisher | <input type="checkbox"/> Body Fluids Clean Up Kit |

## Start the Vehicle

- |  |  |
|--|--|
| <input type="checkbox"/> All gauges in proper operating range? | <input type="checkbox"/> Fuel tank full?     |
| <input type="checkbox"/> Headlights/marker lights operational? | <input type="checkbox"/> Mirrors adjusted?   |
| <input type="checkbox"/> High beams/low beams operational?     | <input type="checkbox"/> Horn operational?   |
| <input type="checkbox"/> Tail lights/Brake lights operational? | <input type="checkbox"/> Wipers operational? |
| <input type="checkbox"/> Turn signals operational?             |  |
| <input type="checkbox"/> Hazard lights operational?            |  |

The following items are recommended for the operator to assess to minimize their opportunity for a breakdown while on their trip:

## Under the Hood

- Oil Level okay?
- Drive belts in good condition (no more than 1/2 inch of slack)
- Power Steering fluid level okay?
- Transmission fluid level okay (check when vehicle is warm)?
- Brake fluid in master cylinder okay?
- Windshield washer fluid level okay?
- Coolant/Antifreeze level okay?

**\*\*All operators are encouraged to visit with the Transportation Director if they are not sure how to check any of these items.\*\***

Comments/Explanations: