



Office of Transportation Services

Fleet Maintenance Division

END OF YEAR BUS CHECKOUT FORM

This form is to be completed the last day of school after your afternoon route.

If you share a bus, you must work with the original driver and assist in cleaning the vehicle. The original driver of that bus turns in this sheet.

Driver Name: _____ Date: _____ Bus #: _____ Mileage: _____

Mark items with an X if complete.

Fuel Topped Off: _____ Doors locked: _____ Windows and Hatches Closed: _____

RED BOOK

Route Sheets/Student Data Shredded: _____ Red Book Turned In: _____ Yellow Card Turned In: _____

BUS CLEANING

Bus Swept: _____ Bus Mopped: _____ Seats Cleaned: _____ Graffiti Cleaned: _____

Dash Cleaned: _____ Driver Compartment Clean: _____ Seat Organizer Cleaned Out: _____

Trash Emptied: _____ Trash Can Rinsed Out: _____ New Trash Liner: _____

COMMENTS

By signing this form, you affirm that the information above is complete and true.

Driver Signature

Fleet Manager Signature