

# School Bus Pre- and Post-Trip Inspection Checklist



Driver Name: \_\_\_\_\_ Bus No.: \_\_\_\_\_ Week of: \_\_\_\_\_

	MON		TUE		WED		THU		FRI	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
8-way lighting system										
4-way hazard warning system										
All lights/signaling devices										
Crossing arm										
All mirrors										
All gauges										
Horn										
Heater/defroster										
Windshield wipers/washers										
Fire extinguisher										
Axe or pry bar										
Portable emergency warning devices										
Brakes/air brakes										
Tires (tread, inflation, lugs)										
Emergency exits										
Seats (condition and mounting)										
No fluid leaks under bus										
Bus walk-thru/check for children										
Other:										
Other:										

**Comment on repairs/maintenance needed. (Mechanic's signature required.)**

\_\_\_\_\_

\_\_\_\_\_

Mechanic Name: \_\_\_\_\_ Mechanic Signature: \_\_\_\_\_

Driver Signature: \_\_\_\_\_ Date: \_\_\_\_\_