# West Park Elementary School District

**Driver Instructions**

1. Driver of the vehicle **MUST** be a West Park School District Employee and **MUST** have completed the Vehicle Training, and Submitted DMV printout, and Drivers License to MOT Office.
2. Driver **MUST** fill out and complete the Driver Trip Sheet. **(Vehicle Inspection, Passenger Count, Teacher or Coach Name, Start Odometer, Finish Odometer, Trip Comments, and Driver Signature.)**
3. Upon returning to the MOT YARD at the end of the trip, Driver **MUST** make sure that the vehicle is cleaned out (No students, food or personal property should be left on Vehicle.)
4. Driver **MUST** make sure that the Completed Trips Sheet, Vehicle Keys, Gate Key, Fuel Cards, and Fuel Receipts are all returned to the designated location.

Teacher/Coach / Driver Name_____ Driver Signature_____ Number of Passengers_____

Trip Date_____ Starting Miles_____ Ending Miles_____ Total Miles Driven_____

## Vehicle Inspection

| ITEM | MON | TUES | WED | THURS | FRI | SAT | SUN |
|---|---|---|---|---|---|---|---|
| Gauges | | | | | | | |
| Brake Check | | | | | | | |
| Parking Brake | | | | | | | |
| Steering | | | | | | | |
| Mirrors | | | | | | | |
| Head Lights | | | | | | | |
| Tail Lights | | | | | | | |
| Service Brake Light | | | | | | | |
| Hazard Lights | | | | | | | |
| Turn Signals | | | | | | | |
| Tires | | | | | | | |
| Horn | | | | | | | |
| Wipers | | | | | | | |

✓ = OK    O = Needs Attention

## Accident Report

| | |
|---|---|
| Vehicle "A" | Driver's Name _____ Vehicle #_____ Date#_____ Time of Accident _____<br><br>Location of Accident _____ Names of Passengers _____<br><br>_____<br><br>_____<br><br>Damage Description_____<br><br>_____ |
| Vehicle "B" | Driver's Name _____ Address _____<br><br>Phone Number _____Name of Passengers_____<br><br>_____<br><br>Driver License #_____ Date Expires _____State Issue_____<br><br>Insurance Name _____ Insurance # _____<br><br>Insurance Phone #_____ Address _____ |