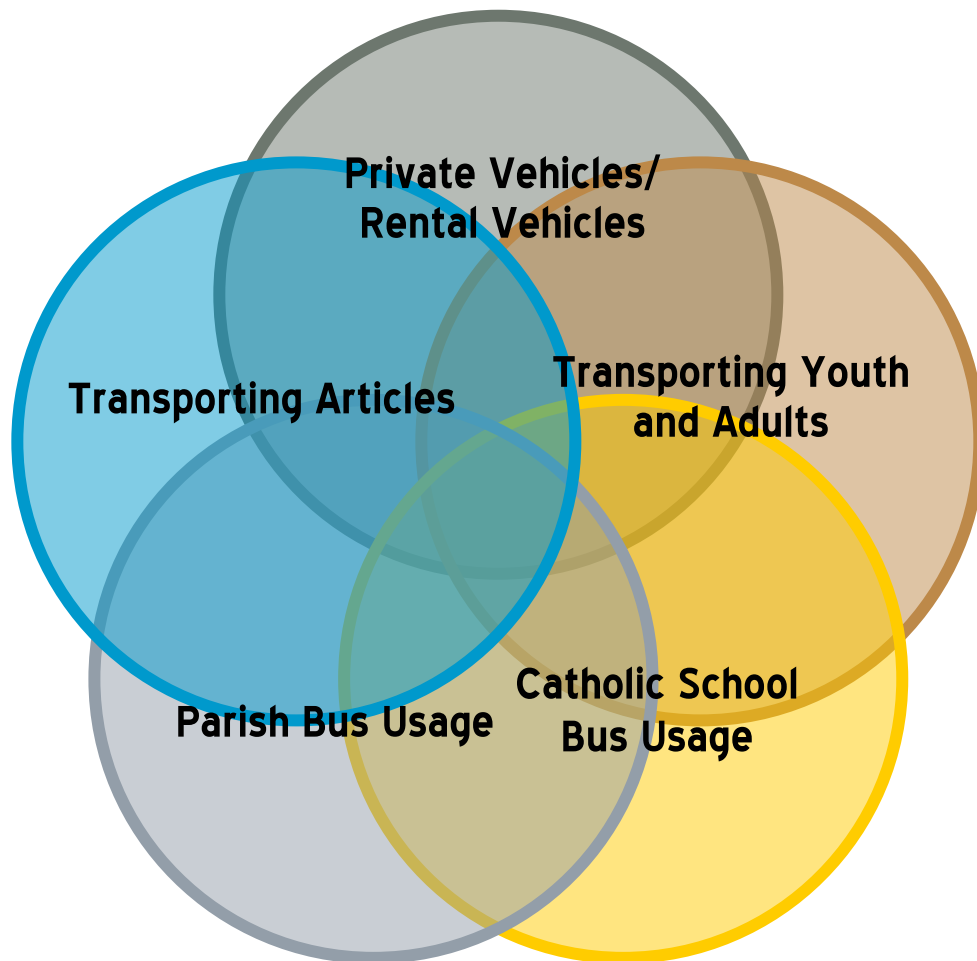




DIOCESAN TRANSPORTATION POLICY



**Diocesan Transportation Policy
Index**

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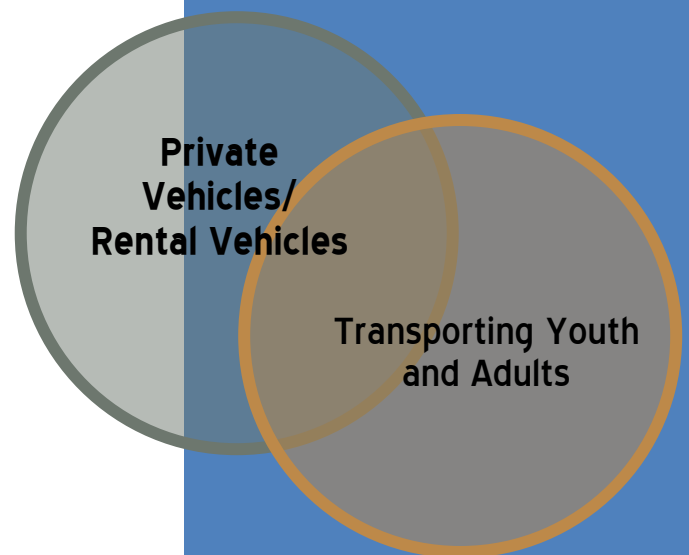
DIOCESE OF VICTORIA TRANSPORTATION POLICY CHECKLIST

PART A: WHEN TRANSPORTING YOUNG PEOPLE/ADULTS IN A VEHICLE UNDER 11 PASSENGERS	PART B: WHEN TRANSPORTING ARTICLES IN A VEHICLE (NOT PEOPLE)
<ul style="list-style-type: none"> <input type="checkbox"/> Driver has completed a Motor Vehicles Check and is approved to drive <input type="checkbox"/> Verification and Driver Acknowledgement Form - completed and signed (page 5) <input type="checkbox"/> Driver Information Form - completed and signed (page 6) <input type="checkbox"/> Employee - completed a required Defensive Driving Course 	<ul style="list-style-type: none"> <input type="checkbox"/> Driver has completed a Motor Vehicles Check and is approved to drive <input type="checkbox"/> Verification and Driver Acknowledgement Form - completed and signed (page 11) <input type="checkbox"/> Driver Information Form - completed and signed (page 12) <input type="checkbox"/> Employee - completed a required Defensive Driving Course
PART C: WHEN TRANSPORTING YOUNG PEOPLE/ADULTS BY BUS IN A PARISH	PART D: WHEN TRANSPORTING YOUNG PEOPLE/ADULTS BY BUS IN A CATHOLIC SCHOOL SETTING
<ul style="list-style-type: none"> <input type="checkbox"/> Driver has completed a Motor Vehicles Check and is approved to drive <input type="checkbox"/> Verification and Driver Acknowledgement Form - completed and signed (page 17) <input type="checkbox"/> Driver Information Form - completed and signed (page 18) <input type="checkbox"/> Employee - completed a required Defensive Driving Course <input type="checkbox"/> Copy of Medical Examiners Certificate/and proof of physical on file <input type="checkbox"/> Vehicle Pre Trip Inspection 	<ul style="list-style-type: none"> <input type="checkbox"/> Driver has completed a Motor Vehicles Check and is approved to drive <input type="checkbox"/> Verification and Driver Acknowledgement Form - completed and signed (page 23) <input type="checkbox"/> Driver Information Form - completed and signed (page 24) <input type="checkbox"/> Employee - completed a required Defensive Driving Course <input type="checkbox"/> Copy of Medical Examiners Certificate/ and proof of physical on file <input type="checkbox"/> Bus Route - Consent of Parent and Bus Route Acknowledge of Risk <input type="checkbox"/> Vehicle Pre Trip Inspection

Part A

PART A APPLIES TO: WHEN ONE IS:

- **TRANSPORTING
YOUNG PEOPLE OR
ADULTS,
WHETHER AN EMPLOYEE
OR A VOLUNTEER.**



Any discretionary items in this policy will be decided by the Diocesan Transportation Committee aka DTC. A designated driver/transportation individual will be designated for each parish/school for record keeping purposes. An alternate must also be designated in case of absences or illness of original designee. The names of these individuals should be provided to the Diocesan Business Office on or before November 1, 2011. Changes to record keeping designees must be submitted immediately.

1. Drivers must be 25 or older.
2. Drivers must have completed the appropriate Safe Environment requirements of the Diocese of Victoria and be approved to drive.
3. Drivers must have a valid Texas driver's license. Drivers having licenses from other states or government entities must be approved by the DTC in order to be utilized.
4. Drivers must have completed a Motor Vehicles Records check for all states where one has resided for the past 5 years. Requests for these checks must be requested ten working days prior to possible utilization. One must be approved to be utilized as a driver by the Diocese of Victoria and the parish/school where one is transporting young people or adults.
5. Driver's approval is at the discretion of DTC or the Bishop of the Diocese. The following minimum standards for unacceptable drivers include but are not limited to drivers who in the past seven years have one or more of these serious violations:
 - a. Driving under the influence of alcohol or drugs
 - b. Hit and Run
 - c. Failure to report an accident
 - d. Negligent homicide arising out of the use of a motor vehicle
 - e. Operating during a period of suspension or revocation
 - f. Using a motor vehicle for commission of a felony
 - g. Operating a motor vehicle without owner's authority (grand theft)
 - h. Permitting an unlicensed person to drive
 - i. Speed Contest
 - j. Sexual Misconduct - Any individual who has been convicted of sexual misconduct will be automatically prohibited from transporting minors in their own or any other vehicle for church/school sponsored events. They are also prohibited from being a passenger in a vehicle transporting a minor(s) for church/school related events.



6. A Motor Vehicles Record check will be performed every three years.
 - a. Drivers are required to notify the parish/school if there is any change in driving record (i.e. moving violations) during the three-year period. Please use Form MOV1, available online at www.victoriadiocese.org, under tab "Business Office", a copy is in the Forms section of this document
7. Drivers must have proof of insurance on the vehicle they are driving that has a minimum liability limit of \$100,000 per individual/\$300,000 per accident/\$50,000 property damage.
8. A Driver Information Form (see page 7) must be kept on file at the parish/school for all vehicles when transporting young people and adults. Catholic Mutual, a member of the DTC or other persons designated by the DTC, will make inspection of these files on periodic basis.
9. A Driver Verification and Acknowledgement Form (See page 6) must be kept on file for all drivers, and be updates and renewed (signed and dated) annually.
10. All occupants of the vehicles must wear seatbelts.
 - a. In vehicles, such as buses, that are not equipped with seatbelts, all must remain seated while the vehicle is in motion.
 - b. Vehicles smaller than an 11-passenger vehicle must be equipped with functioning seat belts.
11. The vehicle must have valid and current registration and license plates.
12. All drivers are required to obey posted maximum and minimum speed limits. During periods of heavy traffic, inclement weather, low visibility, or other poor conditions, speed must be adjusted so that accidents will be avoided.
13. Drivers must be in good health and be physically capable of driving safely. If one is taking medication that impairs judgment, suffering from extreme fatigue, or impaired in any manner, one must refrain from driving.
14. Eleven to fifteen passenger vans **may not** be used to transport young people or adults.
15. Drivers must refrain from talking/communicating on any handheld or hands free device while driving young people or adults.
16. Young people or vulnerable adults should never be left unattended in a vehicle.
17. Young people/vulnerable adults who have a medical condition that is likely to require additional support/medication must travel in the same vehicle with a parent or staff member who is trained in administering support/medication.

18. Drivers must comply with driver license restrictions, if applicable.

19. All state laws should be followed when fueling a vehicle.

* 20. Employees who drive a diocesan/parish vehicle or their own vehicle as part of their employment must complete a defensive driving course upon employment and thereafter every three years. Documentation of satisfactory completion of defensive driving course will be submitted to the parish/school designee and retained at the parish/school.

21. This policy applies to all personal and rental vehicles. There are additional policies regarding rental vehicles, please contact the Business Office for more information.

Additional Guidelines when Transporting Young People/Vulnerable Adults in a Vehicle under 11 passengers

1. Drivers must have completed all (i.e. completed background check and all required Safe Environment classes) Safe Environment requirements of the Diocese of Victoria and be approved to drive.

2. Two adults who are in compliance with the requirements of the Safe Environment policy of the Diocese of Victoria must be present at all times in vehicles that are transporting young people/vulnerable adults – See page 47 for chaperone requirements in the document - Policy and Procedures Resource Manual for Youth Ministry and Parish Catechetical Programs and the *Handbook of Policies and Regulations for Catholic Schools*.

3. Young people under the age of 8 years old who are shorter than 4 feet 9 inches or less than 100 pounds must ride in a car seat or booster seat.

4. In all vehicles transporting youth or vulnerable adults, all passengers over the age of 18 and out of high school for three months (*see page 34 of the Policy and Procedure Manual for Youth Ministry and Parish Catechetical Programs for further clarification*) must comply with the safe environment policies of the Diocese of Victoria.

Re: #20 -A free Defensive Driving Course may be obtained online through Catholic Mutual <http://www.cmgdrivesafe.com>. Certificate of completion must be submitted to the parish/school 10 days before being utilized as a driver. This is accomplished by addressing the results to: safedriving@victoriadiocese.org in the “email results to” field. *This course is valid for Diocesan purposes only.*



Driver Acknowledgement Form

Please initial
for compliance

_____ I , the driver, am 25 years old or older.

_____ I have completed all the appropriate Safe Environment requirements of the Diocese of Victoria.

_____ I have completed and signed a Driver Information Form.

_____ I have a current Texas driver's license.

_____ I have submitted proof of insurance on the vehicle that I am driving and there is a minimum liability limit of \$100,000 per individual/\$300,000 per accident/ \$50,000 property damage as evidenced by the attached copy of the declaration page.

_____ There are adequate functioning seatbelts in the vehicle for the number of occupants being transported and I understand that all occupants are required to wear seatbelts.

_____ The vehicle has current license plates/stickers.

_____ To the best of my knowledge, I am in good health and am physically capable of driving safely.

_____ I am aware I am not to operate any electronic devices while driving.

_____ I will only use a cell phone when safely parked or during an emergency.

_____ I understand the daily maximum driving time is ten hours.

_____ I understand a 30-minute break is required for every 250 miles driven.

_____ I have phone numbers of individuals to call, in the event of an emergency, or contact when needed.

Signature of Driver

Printed Name of Driver

Date

Driver Information Form

Name of Driver	Birthdate
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
Driver's License Number:	State Issuing:
Expiration Date	
Year and Make of Vehicle:	Model:

Vehicle to be used (information to be provided for each vehicle used)

Name of Owner	
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
License Plate #	Month and Year of Expiration:
Name of Insurance Company:	
Month and Year Inspection Sticker Expires	Liability Limits *
Local Insurance Agent:	
Policy Number	Expiration Date:

*** The minimum, acceptable liability limits for privately owned vehicles is \$100,000/\$300,000/\$50,000.**

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a driver I must be **25** years of age or older, hold a valid Texas Driver's License, have the required insurance coverage in effect and been approved to drive in accord with the Safe Environment policies of the Diocese of Victoria.

Signature of Driver	Date
---------------------	------

Office information:

The above information is considered sensitive and should be stored under lock and key, accessible only to authorized personnel.

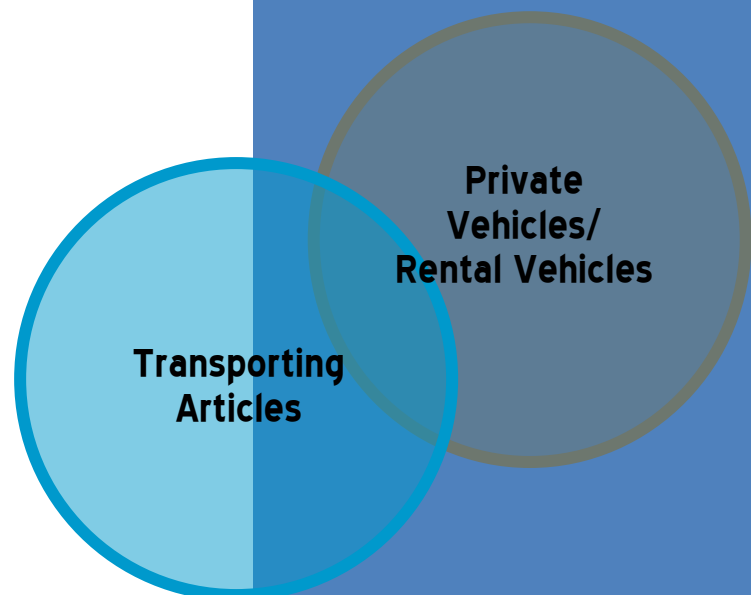
PART B APPLIES TO:

WHEN ONE IS:

- **TRANSPORTING ARTICLES AS PART OF ONE'S EMPLOYMENT/ VOLUNTEER DUTIES IN SERVICE TO A SCHOOL/PARISH ENTITY IN THE DIOCESE OF VICTORIA.**

PLEASE NOTE: THIS PART OF THE POLICY DOES NOT APPLY WHEN TRANSPORTING YOUNG PEOPLE OR ADULTS.

Part B



Any discretionary items in this policy will be decided by the Diocesan Transportation Committee aka DTC. A designated driver/transportation individual will be designated for each parish/school for record keeping purposes. An alternate must also be designated in case of absences or illness of original designee. The names of these individuals should be provided to the Diocesan Business Office on or before November 1, 2011. Changes to record keeping designees must be submitted immediately.

1. Drivers must be 21 years or older
2. Drivers must have a valid Texas driver's license. Drivers having licenses from other states or government entities must be approved by the DTC in order to be utilized.
3. Drivers must have completed a Motor Vehicles Records check for all states where one has resided for the past 5 years. One must be approved to be utilized as a driver by the Diocese of Victoria and the parish/school where one's service is being utilize.
4. Driver's approval is at the discretion of DTC or the Bishop of the Diocese. The following minimum standards for unacceptable drivers include but are not limited to drivers who in the past seven years have one or more of these serious violations:
 - a. Driving under the influence of alcohol or drugs
 - b. Hit and Run
 - c. Failure to report an accident
 - d. Negligent homicide arising out of the use of a motor vehicle
 - e. Operating during a period of suspension or revocation
 - f. Using a motor vehicle for commission of a felony
 - g. Operating a motor vehicle without owner's authority (grand theft)
 - h. Permitting an unlicensed person to drive
 - i. Speed Contest
 - j. Sexual Misconduct - Any individual who has been convicted of sexual misconduct will be automatically prohibited from transporting minors in their own or any other vehicle for church/school sponsored events. They are also prohibited from being a passenger in a vehicle transporting a minor(s) for church/school related events.



5. A Motor Vehicles Record check will be performed every three years.
 - a. Drivers are required to notify the diocese if there is any change in driving record (i.e. moving violations) during the three-year period. Form Mov1, available online at www.victoriadiocese.org, under tab "Business Office", a copy is in the Forms section of this document
6. Drivers must have proof of insurance on the vehicle they are driving must have at least the Texas state minimum insurance.
7. A Driver Information Form (see page 12) must be kept on file at the parish/school for all vehicles. Catholic Mutual, a member of the DTC or other persons designated by the DTC, will make inspection of these files on periodic basis.
8. A Driver Verification and Acknowledgement Form (see page 11) must be kept on file for all drivers, and be updates and renewed (signed and dated) annually.
9. All occupants of the vehicles must wear seatbelts.
10. Vehicles smaller than an 11-passenger vehicle must be equipped with functioning seatbelts.
11. The vehicle must have valid and current registration and license plates.
12. All drivers are required to obey posted maximum and minimum speed limits. During periods of heavy traffic, inclement weather, low visibility, or other poor driving conditions, speed must be adjusted so that accidents will be avoided.
13. Drivers must be in good health and be physically capable of driving safely. If one is taking medication that impairs judgment, suffering from extreme fatigue, or impaired in any manner, one must refrain from driving.
14. Drivers must refrain from talking/communicating on any handheld or hands free device.
15. Drivers must comply with driver license restrictions, if applicable.
16. All state laws should be followed when fueling a vehicle.
- * 17. Employees who drive a diocesan/parish vehicle or their own vehicle, as part of their employment, must complete a defensive driving course upon employment and thereafter every three years. Documentation of satisfactory completion of defensive driving course will be submitted to the parish/school designee and retained at the parish/school.



* Re: #17- A free Defensive Driving Course may be obtained online through Catholic Mutual <http://www.cmgdrivesafe.com>. Certificate of completion must be submitted to the parish/school 10 days before being utilized as a driver. This is accomplished by addressing the results to: safedriving@victoriadiocese.org in the "email results to" field. *This course is valid for Diocesan purposes only.*

Driver Acknowledgement Form

Please initial
for compliance

_____, I, the driver, am 21 years old or older.

_____ I have completed and signed a Driver Information Form.

_____ I have a current Texas driver's license.

_____ I have proof of insurance on the vehicle I am driving and I have at least the Texas state minimum insurance.

_____ There are adequate functioning seatbelts in the vehicle for the number of occupants being transported and I understand that all occupants are required to wear seatbelts.

_____ To the best of my knowledge, I am in good health and am physically capable of driving safely.

_____ The vehicle has current license plates/stickers.

_____ I am aware I am not to operate any electronic devices while driving.

_____ I will only use a cell phone when safely parked or during an emergency.

_____ I understand that the daily maximum driving time is ten hours.

_____ I understand a 30-minute break is required for every 250 miles driven

_____ I have phone numbers of individuals to call in the event of an emergency or contact when needed.

_____ I understand that my personal insurance is the primary insurance in case of an accident/injury.

Signature of Driver

Printed Name of Driver

Date

Driver Information Form

Name of Driver	Birthdate
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
Driver's License Number:	State Issuing:
Expiration date:	
Year and Make of Vehicle:	Model:

Vehicle to be used (information to be provided for each vehicle used)

Name of Owner	
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
License Plate #	Month and Year of Expiration:
Name of Insurance Company:	
Month and Year Inspection Sticker Expires	Liability Limits *
Local Insurance Agent:	
Policy Number	Expiration Date:

*** The minimum, acceptable liability limits for privately owned vehicles is \$30,000/\$60,000/\$25,000.**

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a driver I must be **21** years of age or older, hold a valid Texas Driver's License, have the required insurance coverage in effect and be approved to drive by the Diocese of Victoria.

Signature of Driver	Date
---------------------	------

Office information:

The above information is considered sensitive and should be stored under lock and key, accessible only to authorized personnel.

PART C APPLIES TO:

WHEN ONE IS:

- **TRANSPORTING
YOUNG PEOPLE OR
ADULTS BY BUS BY ANY
PARISH OF THE DIOCESE
OF VICTORIA.**

Part C

Transporting
Youth and
Adults

Parish Bus Usage

Pertinent information from the Texas Department of Public Safety:

For all Bus Drivers

Bus drivers must have a commercial driver's license if they drive a vehicle designed to seat more than 15 persons, including the driver.

Bus drivers must have a passenger endorsement on their commercial driver license. To get the endorsement you must pass a knowledge test on Sections 2 and 4 of this manual. If your bus has air brakes, you must also pass a knowledge test on Section 5. You must also pass the skills tests required for the class of vehicle you drive.

Section 4.1 of the *TEXAS COMMERCIAL MOTOR VEHICLE DRIVERS HANDBOOK*

For all School Bus Drivers

School bus drivers must have a commercial driver license if they drive a vehicle designed to transport (seat) 16 or more persons, including the driver.

School bus drivers must have a school bus endorsement in addition to a passenger endorsement on their commercial driver's license (CDL). To get the school bus endorsement, you must pass a knowledge test on sections 2, 4 and 10 of this manual. (If your school bus has air brakes, you must also pass a knowledge test on Section 5.) You must also pass the skills test required for the class of school bus you drive or intend to drive.

This section does NOT provide information on all the federal and state requirements needed before you drive a school bus. You should be thoroughly familiar with all specific school bus procedures, laws and regulations in your state and local school district.

Section 10.1 of the *TEXAS COMMERCIAL MOTOR VEHICLE DRIVERS HANDBOOK*

One may access a complete copy of this information at:

<http://www.txdps.state.tx.us/DriverLicense/documents/DL-7C.pdf>

Bus Transportation Guidelines

In addition to adhering to the transportation guidelines, the following guidelines must be adhered to by drivers when driving a bus:



Policy

1. Drivers must have a valid CDL Class B license with a passenger endorsement and a copy of license must be on file in the parish/school office.
2. Drivers must be certified in school bus safety. Continuing education in school bus safety is required in accord with the recommendations of the Texas Department of Public Safety
3. Drivers may be subject to random drug testing. The cost of this testing will be paid by the Diocese of Victoria, and will be administered at a diocesan - approved venue.
4. Drivers must refrain from talking/communicating on any handheld or hands - free device while driving young people or adults.
5. Drivers must submit proof of completion of annual physicals and be physically capable to perform every aspect of the position as driver of the bus

(for example, clear the bus in an emergency or accident). See link on TxDPS website for current form:

<http://www.txdps.state.tx.us/internetforms/Forms/SBT-11.pdf>

6. Initially hired bus drivers (hired for the purpose of driving a bus or where driving is part of one's job description, whether written or implied) must have satisfactorily completed a drug/alcohol test at least five working days prior to scheduled date to drive, and be approved before driving.

7. In the event of an accident while driving, drivers must submit to a drug/alcohol testing within 24 hours.

8. In accord with Texas State School Bus Guidelines, all buses shall be equipped with the following:

a. BODY FLUID CLEANUP KIT

Each bus shall be equipped with a mounted, removable, moisture-proof hard plastic body fluid cleanup kit. Container shall be mounted in the driver's compartment and the container shall be easily removed without tools. This kit shall be identified as a body fluid cleanup kit, and shall NOT display the biohazard symbol, and contain as a minimum the following items:

- 1 -- Absorbent Powder, 2 oz bag
- 1 -- Antiseptic BZK Towelette
- 1 -- Bag, Plastic, Black w/Tie
- 1 -- Biohazard Bag w/Tie
- 1 -- Certi-Green Cleaner Towelette
- 1 -- Pair Non-latex gloves
- 1 -- Mask
- 1 -- Scoop Bag w/Scraper
- 2 -- Towel, Paper Crepe
- 1 -- Poly Box 8" X 5" x 3"

b. FIRE EXTINGUISHER

Each bus shall be equipped with at least one UL-approved pressurized, dry chemical fire extinguisher. The extinguisher shall be mounted (and secured) in a bracket, located in the driver's compartment and readily accessible to the driver and passengers. A pressure gauge shall be mounted on the extinguisher and shall be easily read without removing the extinguisher from its mounted position. The fire extinguisher shall have a total rating of 2A10BC (5lb) or greater. The operating mechanism shall be sealed with a type of seal that will not interfere with the use of the fire extinguisher.

c. FIRST-AID KIT

Each bus shall be equipped with a hard plastic, moisture and dust proof, removable first aid kit. Container shall be mounted in the driver's compartment

and the container shall be easily removed without tools. The kit shall contain each item listed below in the minimum quantities indicated:

Quantity Item

- 2 -- 1" x 2-1/2 yard adhesive tape rolls
- 24 -- sterile gauze pads 3" x 3"
- 20 -- 3/4" x 3" adhesive bandages
- 8 -- 2" bandage compress
- 10 -- 3" bandage compress
- 2 -- 2" x 5 yard sterile gauze roller bandages
- 2 -- non-sterile triangular bandage approx. 40" x 36" x 54", 2 safety pins
- 3 -- sterile gauze pads 36" x 36"
- 3 -- sterile eye pads
- 1 -- rounded end scissors
- 1 -- pair non-latex gloves
- 1 -- mouth-to-mouth airway
- 1-- basic first aid / CPR instructions included

d. ROADSIDE REFLECTORS

Each school bus shall be equipped with three (3) triangular warning devices meeting the requirements of FMVSS No. 125. The devices shall be packed three (3) per metal or heavy-duty plastic box. Container for warning devices shall be secured with a bracket mounted in the driver's compartment and the container shall be easily removed without tools.

All of the following suggested locations were accessed 5/1/2011. It is not required that items be purchased from these vendors. Check carefully that the vendors' products have all the required listed specifications.

Body Fluids kit:

<http://www.rmkdistributors.com/products.aspx?cat=1178&pageId=4&parent=1178>

First Aid Kits:

http://firstaidmart.com/site/product_detail.aspx?item_guid=7a006044-bcb9-4830-96f3-df8367192ad4

Fire Extinguishers - suggested from Victoria Fire & Safety Inc.

406 N Laurent St Victoria, TX 77901- 7078 (361) 573-4523

Reflectors: <http://www.kencofire.com/jakihisarotr.html>





Policy

When utilizing contract bus drivers from an independent school district or charter bus company: These drivers are not required to attend the diocesan mandated safe environment training, but the required ratios of safe environment compliant adults must be on the bus when transporting young people/vulnerable adults. Proof of insurance must be obtained from contracting company.

Additional Guidelines when Transporting Young People or Vulnerable Adults on a Bus



Policy

1. A minimum of two adults who have completed all of the requirements of the Safe Environment policy of the Diocese of Victoria **must be present at all times in vehicles that are transporting young people or vulnerable adults.**
2. Additionally there must be a ratio of one safe environment compliant adult for every 10 young people/vulnerable adults on a bus. The bus driver is not to be included in this ratio, as his/her primary job is to drive and not to chaperone the occupants on the bus.

Driver Information Form - to be completed by each bus driver

Name of Driver	Birthdate
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
Driver's License Number:	State Issuing:
Bus Driver Certification Date: _____	
Signature of Driver	Date

Office information:

The above information is considered sensitive and should be stored under lock and key, accessible only to authorized personnel.

Please complete this information for each bus -

please make copies as necessary to accommodate all the buses in your parish/school

Bus #1	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

Bus #2	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

Bus #3	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

PART D APPLIES TO:

WHEN ONE IS:

- **TRANSPORTING
YOUNG PEOPLE OR
ADULTS BY BUS BY ANY
CATHOLIC SCHOOL OF
THE DIOCESE OF
VICTORIA.**

Part D

Transporting
Youth and
Adults

Catholic
School Bus
Usage

Pertinent information from the Texas Department of Public Safety:

For all Bus Drivers

Bus drivers must have a commercial driver’s license if they drive a vehicle designed to seat more than 15 persons, including the driver.

Bus drivers must have a passenger endorsement on their commercial driver license. To get the endorsement you must pass a knowledge test on Sections 2 and 4 of this manual. If your bus has air brakes, you must also pass a knowledge test on Section 5. You must also pass the skills tests required for the class of vehicle you drive.

Section 4.1 of the *TEXAS COMMERCIAL MOTOR VEHICLE DRIVERS HANDBOOK*

For all School Bus Drivers

School bus drivers must have a commercial driver license if they drive a vehicle designed to transport (seat) 16 or more persons, including the driver.

School bus drivers must have a school bus endorsement in addition to a passenger endorsement on their commercial driver’s license (CDL). To get the school bus endorsement, you must pass a knowledge test on sections 2, 4 and 10 of this manual. (If your school bus has air brakes, you must also pass a knowledge test on Section 5.) You must also pass the skills test required for the class of school bus you drive or intend to drive.

This section does NOT provide information on all the federal and state requirements needed before you drive a school bus. You should be thoroughly familiar with all specific school bus procedures, laws and regulations in your state and local school district.

Section 10.1 of the *TEXAS COMMERCIAL MOTOR VEHICLE DRIVERS HANDBOOK*

One may access a complete copy of this information at:

<http://www.txdps.state.tx.us/DriverLicense/documents/DL-7C.pdf>

Bus Transportation Guidelines for Catholic schools ONLY

In addition to adhering to the transportation guidelines, the following guidelines must be adhered to by drivers when driving a bus for Catholic schools:



- a. Drivers must have a valid CDL Class B license with a passenger endorsement and a copy of license must be on file in the parish/school office.
- a. Drivers must be certified in school bus safety. Continuing education in school bus safety is required in accord with the recommendations of the Texas Department of Public Safety
- b. Hired Bus drivers (one who is hired for the purpose of driving a bus or where driving is part of one’s job description, whether written or implied) must have satisfactorily completed a drug/alcohol test at least five working days prior to scheduled date to drive, and be approved before driving.
- c. Drivers may be subject to random drug testing. The cost of this testing will be paid by the Diocese of Victoria, and will be administered at a diocesan approved venue.

- d. Drivers must refrain from talking/communicating on any handheld or hands free device while driving young people or adults.
- e. Drivers must submit proof of completion of annual physicals and be physically capable to perform every aspect of the position as driver of the bus (for example, clear the bus in an emergency or accident).
- f. In the event of an accident while driving, drivers must submit to a drug/alcohol testing within 24 hours.
- g. In accord with Texas State School Bus Guidelines, all buses shall be equipped with the following:

❖ **BODY FLUID CLEANUP KIT**

Each bus shall be equipped with a mounted, removable, moisture-proof hard plastic body fluid cleanup kit. Container shall be mounted in the driver's compartment and the container shall be easily removed without tools. This kit shall be identified as a body fluid cleanup kit, and shall NOT display the biohazard symbol, and contain as a minimum the following items:

- 1 -- Absorbent Powder, 2 oz. bag
- 1 -- Antiseptic BZK Towelette
- 1 -- Bag, Plastic, Black w/Tie
- 1 -- Biohazard Bag w/Tie
- 1 -- Certi-Green Cleaner Towelette
- 1 -- Pair Non-latex gloves
- 1 -- Mask
- 1 -- Scoop Bag w/Scraper
- 2 -- Towel, Paper Crepe
- 1 -- Poly Box 8" X 5" x 3"

❖ **FIRE EXTINGUISHER**

Each bus shall be equipped with at least one UL-approved pressurized, dry chemical fire extinguisher. The extinguisher shall be mounted (and secured) in a bracket, located in the driver's compartment and readily accessible to the driver and passengers. A pressure gauge shall be mounted on the extinguisher and shall be easily read without removing the extinguisher from its mounted position. The fire extinguisher shall have a total rating of 2A10BC (5lb) or greater. The operating mechanism shall be sealed with a type of seal that will not interfere with the use of the fire extinguisher.

❖ **FIRST-AID KIT**

Each bus shall be equipped with a hard plastic, moisture and dust proof, removable first aid kit. Container shall be mounted in the driver's compartment and the container shall be easily removed without tools. The kit shall contain each item listed below in the minimum quantities indicated:

Quantity Item

- 2 -- 1" x 2-1/2 yard adhesive tape rolls
- 24 -- sterile gauze pads 3" x 3"
- 20 -- 3/4" x 3" adhesive bandages
- 8 -- 2 " bandage compress
- 10 -- 3" bandage compress
- 2 -- 2" x 5 yard sterile gauze roller bandages
- 2 -- non-sterile triangular bandage approx. 40" x 36" x 54", 2 safety pins
- 3 -- sterile gauze pads 36" x 36"
- 3 -- sterile eye pads
- 1 -- rounded end scissors
- 1 -- pair non-latex gloves
- 1 -- mouth-to-mouth airway
- 1-- basic first aid / CPR instructions included

❖ **ROADSIDE REFLECTORS**

Each school bus shall be equipped with three (3) triangular warning devices meeting the requirements of FMVSS No. 125. The devices shall be packed three (3) per metal or heavy-duty plastic box. Container for warning devices shall be secured with a bracket mounted in the driver's compartment and the container shall be easily removed without tools.

All of the following suggested locations were accessed 5/1/2011. It is not required that items be purchased from these vendors, Check carefully that the vendors' products have all the required listed specifications. It is required that all specifications be adhered to.

Body Fluids kit:

<http://www.rmkdistributors.com/products.aspx?cat=1178&pageId=4&parent=1178>

First Aid Kits:

http://firstaidmart.com/site/product_detail.aspx?item_guid=7a006044-bcb9-4830-96f3-df8367192ad4

Fire Extinguishers - suggested from Victoria Fire & Safety Inc.

406 N Laurent St Victoria, TX 77901- 7078 (361) 573-4523

Reflectors: <http://www.kencofire.com/jakihisarotr.html>



When utilizing contract drivers from an Independent School District or charter bus company: These drivers are not required to attend the diocesan mandated Safe Environment training, but the required ratios of Safe Environment compliant adults must be on the bus when transporting young people/vulnerable adults. Proof of insurance must be obtained from contracting company.

Additional Guidelines when Transporting Young People on a Bus



Policy

- A minimum of two adults who have completed all of the requirements of the Safe Environment policy of the Diocese of Victoria must be present at all times in vehicles that are transporting young people.
- Additionally, there is a **recommended** ratio of **one Safe Environment compliant adult for every 15 young people on a bus**. The bus driver is not to be included in this ratio, as his/her job is to drive and not to chaperone the occupants on the bus. (NOTE: The only exception will be during regular school bus routes. In these particular cases, the bus driver may be the ONLY chaperone as long as the parents/guardians of the student riders have completed and submitted a **Consent of Parent/Guardian & Bus Route Acknowledgement of Risk** form .)

Driver Information Form - to be completed by each bus driver

Name of Driver	Birthdate
Address	
City/St/Zip	
Phone: (____)	Cell Phone: (____)
Driver's License Number:	State Issuing:
Bus Driver Certification Date: _____	
Signature of Driver	Date

Office information:

The above information is considered sensitive and should be stored under lock and key, accessible only to authorized personnel.

Please complete this information for each bus -

please make copies as necessary to accommodate all the buses in your parish/school

Bus #1	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

Bus #2	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

Bus #3	
Name of Owner	
Address	
City/St/Zip	
License Plate #	Month and Year of Expiration:
Month and Year Inspection Sticker Expires: _____	
Bus Capacity:	

Consent of Parent/Guardian & Bus Route Acknowledgement of Risk**

To the Parent(s)/Guardian(s) of: _____ **Grade** _____

Please read the contents of this Consent and Acknowledgement of Risk form. Clarify any questions or concerns with the principal **BEFORE** signing it. If this form is not signed and returned to (name of school)

_____, School by _____, your child
WILL NOT BE ALLOWED to use the Bus Route services. (Use one form for each student rider.)

BUS ROUTE INFORMATION

The school will make every reasonable effort to ensure that:

1. The staff, volunteers, and/or service providers involved are suitably trained and qualified.
2. The students are adequately supervised during the pick-up/drop-off trips.
3. The location(s) used for pick-up/drop-off are appropriate and safe for the students.
4. A Safety/Emergency Plan is in place to identify and manage known potential risks.

*NOTE: Please be aware that there may be times when the school's resources prohibit it from providing the **recommended two (2) adults**, who are **Safe Environment Compliant**, to provide chaperone coverage for school Bus Routes.*

CONSENT AND ACKNOWLEDGEMENT OF RISK

1. I acknowledge my right to obtain as much information as I require about this route and associated hazards, including information beyond that provided to me the school.
2. I freely and voluntarily assume the risks/hazards inherent in the School Bus Route and understand and acknowledge that my child may suffer personal and potentially serious injury due to an unforeseeable event to his/her participation.
3. My child has been informed that he/she is to abide by the rules and regulations, including directions and instructions from the school's and/or service providers administrators, instructors, and supervisors over all phases of the School Bus Route.
4. In the event my child fails to abide by these rules and regulations, disciplinary action may require his/her expulsion from further participation or that I be contacted to have him/her picked up, unless I have specified other transport arrangements.
5. I understand that it is my duty to advise the school of any medical/health concerns of my child that may affect his/her participation.
6. I acknowledge that the school may choose to cancel/postpone the route if travel conditions are dangerous for whatever reason deemed unsafe (e.g., weather, health advisory). I accept that the school will not be liable for any costs associated with this cancellation/postponement.
7. I consent that the school, through its employees, agents and officers may secure such medical advice and services that they deem necessary for my child's health and safety, and that I shall be financially responsible for such advice.
8. Based on my understanding, acknowledgement, and consents as described herein, I agree that (*Name of Student*) _____ has my permission to participate in the Bus Route provided by my child's school.

Name (please print): _____ **Signature** _____ **Date** _____

In case of emergency, ph.#: _____
Alternate contact & ph.# _____ / _____

**** One copy remains at school and another copy is kept with bus driver.**

Additional Procedures for Various Bus and Vehicle-Related Situations

- **Bus emergency**
- **Evacuation**
- **Lifting passengers**

BUS EMERGENCY

These procedures are for bus drivers in a serious bus accident or other emergency that occurs while transporting students for, or on behalf of, the schools within the Diocese of Victoria. The drivers may need to make spontaneous independent decisions, based on the nature of the emergency, age of children, location of bus, etc. Listed below are two scenarios with detailed procedures. A copy of these procedures shall be kept in the emergency packet of each school bus. Also, included for your use, there are procedures for evacuation and lifting passengers, should the need arise. Finally, there are appendices for vehicle checklists.

Scenario 1: Flood

Scenario 2: Serious Accident or Bus Fire

SCENARIO 1: FLOOD

1. DO NOT drive through flooded streets and/or roads.
2. Take an alternate route or wait for public safety personnel to determine safety.
3. Stay with disabled bus until help arrives.
4. Contact the Principal and/or Bus Dispatch to report location and condition of students.
5. In all instances, do not attempt to cross damaged bridges or overpasses.
6. The driver should account for all students and staff throughout the emergency.

SCENARIO 2: SERIOUS ACCIDENT OR BUS FIRE

1. Park the bus in a safe location, if possible.
2. Set the emergency brake and turn off the ignition and take keys.
3. Evacuate the bus in the event of a fire. (*refer to Evacuation Procedures*)
4. Check for injuries and provide appropriate first aid.
5. Call "911" to provide exact location and wait for arrival of emergency responders.
6. Contact the Principal and Bus Dispatch to report location and condition of students.
7. Stay with the disabled bus until help arrives.
8. Account for all students and staff.

EVACUATION PROCEDURES (CLEARING THE BUS)

1. Park the bus as close to the shoulder of the road as possible
 - Turn hazard lights on
 - Set the parking brake
 - Turn the engine off and take keys
2. Stand facing the rear of the bus
3. Give the command: "Remain seated; prepare to evacuate."
4. Turn toward the front of the bus.
5. Move backwards to the first occupied seat.
6. Starting with either the left or the right seat:
 - Touch the shoulder of the person nearest to the aisle to indicate that the passengers in that seat are to move off.
 - Keep the passengers in the seat opposite in their seat by holding the hand palm out in a restraining gesture until the aisle is clear.
 - Move out the passengers in the opposite seat, using the same signal as above.
 - Move backwards down the aisle, repeating this procedure at each seat until the bus is empty.
 - Check the bus from the very back seat to the front, making sure it is empty.
7. Have evacuating students move to a safe distance (100ft) and keep them there as a group, away from any dangerous area.
8. Continue to check for students while removing the fire extinguisher or first aid kit, if needed.
9. Call or have someone call the fire department, the school, the pastor and the garage, as necessary.
10. A fire at the front of the bus may make the front entrance unusable and an alternate route of evacuation necessary. Normally, the front entrance will be available, but the emergency door can be used as the primary exit during an emergency.
11. Evacuation through both doors is fastest, with the rear monitor working forward seat by seat and the driver working backward seat by seat.
12. The windshield and rear windows can also be pushed out to facilitate evacuation. If the bus is on the side, use the roof hatches as well as the emergency doors on the up side to evacuate students.

PROCEDURES FOR LIFTING PASSENGERS

PURPOSE: The purpose of proper lifting techniques is to move the passenger without injury to yourself or the passenger.

BASIC RULES

1. Tell the passenger what you are going to do.
2. Estimate the weight of the passenger. Never attempt to carry a student alone who weighs more than half your own weight unless the safety of the student is in immediate danger, and no assistance is available.
3. Always attempt to get help if you have any doubts about your ability to lift the student.
If there is only a driver on a bus, and the necessity for an emergency evacuation develops, some dioceses/districts suggest that the driver activate the alternating red lights, as the evacuation procedure is truly an unloading procedure. Such action can draw attention from motorists that you need assistance.
4. Be sure your path is CLEAR.
5. Stand with both feet firmly planted, about shoulder width apart for good balance.
6. Always bend from knees, not from back, so that you use your thigh muscles rather than your back muscles to do the lifting.
7. When lifting and carrying, keep the student as close to your own body as possible.
8. Shift the position of your feet to move. **DO NOT TWIST YOUR BODY.** Take small steps to turn.

SINGLE PERSON LIFT

1. Follow the basic rules 1-8. Most strains, fatigue, and back injuries caused by lifting are due to using the **WRONG** muscles. Use your strong leg muscles (by bending at the knees and hips) **NOT YOUR BACK MUSCLES. KEEP YOUR BACK STRAIGHT.**
2. Keep equal weight on both feet and lower yourself to the level of the student by bending your knees before lifting.
3. Once in position, put one arm around the upper back and the other under both knees.

TWO PERSON LIFT

1. Follow basic rules 1-8.
2. **TO LIFT FROM A WHEELCHAIR:**
 - A. Position the wheelchair as close to your destination as possible. In an emergency situation, to save time and congestion, leave the chair where it is strapped and blanket pull or carry the student to the appropriate exit location.
 - B. One person stands in front to the side, the other in back.
 - C. The person in front removes the arm rest (if detachable) and folds up the footrest.
 - D. The person in back removes the seat belt and any other positioning device.
 - E. The person in front, bending from knees, lowers himself or herself to place one arm under the student's knees and the other under the occupant's thighs.
 - F. Person in back, places his or her arms under student's armpits, reaching forward to grasp both student's wrists firmly. (Your right hand to student's right wrist; left hand to left wrist.)
 - G. Lift together on the count of 3. (Remember to use your legs to lift.)
 - H. Walk to area where student is to be placed and lower on the count of 3, bending from the knees.

TO LIFT FROM A BUS SEAT

A. Use the same procedure as above, but first, slide the student to the edge of the bus seat near the aisle.

BLANKET LIFT

1. Fold a blanket in half, place on the floor as close to the child as possible.
2. Follow basic lifting rules 1-8 and lower the student to the blanket.
3. ONE PERSON LIFT: Place the student's head toward the direction of exit, lift the blanket from head and slide to safety.

TO ASSIST A PERSON UP STAIRS

1. Follow basic rules 1-8.
2. Curl the student up as much as possible. Keep the student's arms and legs from flopping loosely. This flopping could throw you off balance, and cause a fall.
3. Support the student's head and neck as you would an infant's.
4. Do not lift student up by an arm or leg except in extreme emergency.
5. Slow rocking or a firm holding will help to relax a very "tense" student.

BASIC BODY MECHANICS

1. Size up load and do not hesitate to ask for help.
2. Be sure that the passenger knows you are going to lift him/her.
3. Plan ahead: How you will lift and where you are going.
4. Bend your knees instead of your back. Keep your back straight.
5. Keep your feet apart while lifting to give a board base of support.
6. Keep the person close to you.
7. If lifting with someone else, lift smoothly and together. Count 1, 2,3.
8. Take small steps. Never twist your body while lifting or carrying.

Additional Forms



MOVING VIOLATION NOTIFICATION FORM

Name

Address

City State Zip Code

Email

Phone Number

License plate # Year of vehicle Make

Model of vehicle Date of ticket

What was the violation?

Please explain reason for issuance of ticket:

Were additional citations given (include any moving and non-moving violations):

If yes, please list:

Please submit this form to the business office of the Diocese of Victoria within 10 business days of receiving any moving violation. If this results in a change in your ability to be considered a driver for the Diocese, your parish/school will be notified and it is their responsibility to notify you.

To electronically sign and submit this document, please click on the red tab in the signature field, allow your name and verification to be printed on the signature field and click on the "email this form" (buttons are located on the top and the bottom of this form) . This document can also be printed, manually signed, and mailed to : Business Office, Diocese of Victoria, 1505 E. Mesquite, Victoria, Texas 77901

Current Date Signature Field

Medical Examination Report FOR COMMERCIAL DRIVER FITNESS DETERMINATION

649-F (8045)

1. DRIVER'S INFORMATION Driver completes this section								
Driver's Name (Last, First, Middle)		Social Security No.		Birthdate M / D / Y	Age	Sex <input type="checkbox"/> M <input type="checkbox"/> F	New Certification <input type="checkbox"/> Recertification <input type="checkbox"/> Follow-up <input type="checkbox"/>	Date of Exam
Address		City, State, Zip Code		Work Tel: () Home Tel: ()		Driver License No.	License Class <input type="checkbox"/> A <input type="checkbox"/> C <input type="checkbox"/> B <input type="checkbox"/> D <input type="checkbox"/> Other	State of Issue

2. HEALTH HISTORY Driver completes this section, but medical examiner is encouraged to discuss with driver.		
<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/> Any illness or injury in the last 5 years?</p> <p><input type="checkbox"/> <input type="checkbox"/> Head/Brain injuries, disorders or illnesses</p> <p><input type="checkbox"/> <input type="checkbox"/> Seizures, epilepsy <input type="checkbox"/> medication _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Eye disorders or impaired vision (except corrective lenses)</p> <p><input type="checkbox"/> <input type="checkbox"/> Ear disorders, loss of hearing or balance</p> <p><input type="checkbox"/> <input type="checkbox"/> Heart disease or heart attack; other cardiovascular condition <input type="checkbox"/> medication _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Heart surgery (valve replacement/bypass, angioplasty, pacemaker)</p> <p><input type="checkbox"/> <input type="checkbox"/> High blood pressure <input type="checkbox"/> medication _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Muscular disease</p> <p><input type="checkbox"/> <input type="checkbox"/> Shortness of breath</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/> Lung disease, emphysema, asthma, chronic bronchitis</p> <p><input type="checkbox"/> <input type="checkbox"/> Kidney disease, dialysis</p> <p><input type="checkbox"/> <input type="checkbox"/> Liver disease</p> <p><input type="checkbox"/> <input type="checkbox"/> Digestive problems</p> <p><input type="checkbox"/> <input type="checkbox"/> Diabetes or elevated blood sugar controlled by: <input type="checkbox"/> diet <input type="checkbox"/> pills <input type="checkbox"/> insulin</p> <p><input type="checkbox"/> <input type="checkbox"/> Nervous or psychiatric disorders, e.g., severe depression medication _____</p> <p><input type="checkbox"/> <input type="checkbox"/> Loss of, or altered consciousness</p>	<p>Yes No</p> <p><input type="checkbox"/> <input type="checkbox"/> Fainting, dizziness</p> <p><input type="checkbox"/> <input type="checkbox"/> Sleep disorders, pauses in breathing while asleep, daytime sleepiness, loud snoring</p> <p><input type="checkbox"/> <input type="checkbox"/> Stroke or paralysis</p> <p><input type="checkbox"/> <input type="checkbox"/> Missing or impaired hand, arm, foot, leg, finger, toe</p> <p><input type="checkbox"/> <input type="checkbox"/> Spinal injury or disease</p> <p><input type="checkbox"/> <input type="checkbox"/> Chronic low back pain</p> <p><input type="checkbox"/> <input type="checkbox"/> Regular, frequent alcohol use</p> <p><input type="checkbox"/> <input type="checkbox"/> Narcotic or habit forming drug use</p>

For any YES answer, indicate onset date, diagnosis, treating physician's name and address, and any current limitation. List all medications (including over-the-counter medications) used regularly or recently.

I certify that the above information is complete and true. I understand that inaccurate, false or missing information may invalidate the examination and my Medical Examiner's Certificate.

Driver's Signature _____ Date _____

Medical Examiner's Comments on Health History (The medical examiner must review and discuss with the driver any "yes" answers and potential hazards of medications, including over-the-counter medications, while driving. This discussion must be documented below.)

3. VISION Standard: At least 20/40 acuity (Snellen) in each eye with or without correction. At least 70 degrees peripheral in horizontal meridian measured in each eye. The use of corrective lenses should be noted on the Medical Examiner's Certificate.

INSTRUCTIONS: When other than the Snellen chart is used, give test results in Snellen-comparable values. In recording distance vision, use 20 feet as normal. Report visual acuity as a ratio with 20 as numerator and the smallest type read at 20 feet as denominator. If the applicant wears corrective lenses, these should be worn while visual acuity is being tested. If the driver habitually wears contact lenses, or intends to do so while driving, sufficient evidence of good tolerance and adaptation to their use must be obvious. **Monocular drivers are not qualified.**

Numerical readings must be provided.

ACUITY	UNCORRECTED	CORRECTED	HORIZONTAL FIELD OF VISION
Right Eye	20/	20/	Right Eye ◊
Left Eye	20/	20/	Left Eye ◊
Both Eyes	20/	20/	

Applicant can recognize and distinguish among traffic control signals and devices showing standard red, green, and amber colors? Yes No

Applicant meets visual acuity requirement only when wearing: Corrective Lenses

Monocular Vision: Yes No

Complete next line only if vision testing is done by an ophthalmologist or optometrist

Date of Examination _____ Name of Ophthalmologist or Optometrist (print) _____ Tel. No. _____ License No./ State of Issue _____ Signature _____

4. HEARING Standard: a) Must first perceive forced whispered voice \geq 5 ft., with or without hearing aid, or b) average hearing loss in better ear \leq 40 dB Check if hearing aid used for tests. Check if hearing aid required to meet standard.

INSTRUCTIONS: To convert audiometric test results from ISO to ANSI, -14 dB from ISO for 500Hz, -10dB for 1,000 Hz, -8.5 dB for 2000 Hz. To average, add the readings for 3 frequencies tested and divide by 3.

Numerical readings must be recorded.

a) Record distance from individual at which forced whispered voice can first be heard.	Right ear \ Feet	Left Ear \ Feet
--	------------------	-----------------

b) If audiometer is used, record hearing loss in decibels. (acc. to ANSI Z24.5-1951)

Right Ear			Left Ear		
500 Hz	1000 Hz	2000 Hz	500 Hz	1000 Hz	2000 Hz
Average:			Average:		

5. BLOOD PRESSURE/ PULSE RATE Numerical readings must be recorded. Medical Examiner should take at least two readings to confirm BP.

Blood Pressure	Systolic	Diastolic
----------------	----------	-----------

Driver qualified if \leq 140/90.

Pulse Rate: Regular Irregular

Reading	Category	Expiration Date	Recertification
140-159/90-99	Stage 1	1 year	1 year if \leq 140/90. One-time certificate for 3 months if 141-159/91-99.
160-179/100-109	Stage 2	One-time certificate for 3 months.	1 year from date of exam if \leq 140/90
\geq 180/110	Stage 3	6 months from date of exam if \leq 140/90	6 months if \leq 140/90

6. LABORATORY AND OTHER TEST FINDINGS Numerical readings must be recorded.

Urinalysis is required. Protein, blood or sugar in the urine may be an indication for further testing to rule out any underlying medical problem.

Other Testing (Describe and record) _____

URINE SPECIMEN	SP. GR.	PROTEIN	BLOOD	SUGAR
----------------	---------	---------	-------	-------

The presence of a certain condition may not necessarily disqualify a driver, particularly if the condition is controlled adequately, is not likely to worsen or is readily amenable to treatment. Even if a condition does not disqualify a driver, the medical examiner may consider deferring the driver temporarily. Also, the driver should be advised to take the necessary steps to correct the condition as soon as possible particularly if the condition, if neglected, could result in more serious illness that might affect driving.

Check YES if there are any abnormalities. Check NO if the body system is normal. Discuss any YES answers in detail in the space below, and indicate whether it would affect the driver's ability to operate a commercial motor vehicle safely. Enter applicable item number before each comment. If organic disease is present, note that it has been compensated for. See Instructions to the Medical Examiner for guidance.

BODY SYSTEM	CHECK FOR:	YES*	NO	BODY SYSTEM	CHECK FOR:	YES*	NO
1. General Appearance	Marked overweight, tremor, signs of alcoholism, problem drinking, or drug abuse.			7. Abdomen and Viscera	Enlarged liver, enlarged spleen, masses, bruits, hernia, significant abdominal wall muscle weakness.		
2. Eyes	Pupillary equality, reaction to light, accommodation, ocular motility, ocular muscle imbalance, extraocular movement, nystagmus, exophthalmos. Ask about retinopathy, cataracts, aphakia, glaucoma, macular degeneration and refer to a specialist if appropriate.			8. Vascular System	Abnormal pulse and amplitude, carotid or arterial bruits, varicose veins.		
3. Ears	Scarring of tympanic membrane, occlusion of external canal, perforated eardrums.			9. Genito-urinary System	Hernias.		
4. Mouth and Throat	Irremediable deformities likely to interfere with breathing or swallowing.			10. Extremities- Limb impaired. Driver may be subject to SPE certificate if otherwise qualified.	Loss or impairment of leg, foot, toe, arm, hand, finger, perceptible limp, deformities, atrophy, weakness, paralysis, clubbing, edema, hypotonia. Insufficient grasp and prehension in upper limb to maintain steering wheel grip. Insufficient mobility and strength in lower limb to operate pedals properly.		
5. Heart	Murmurs, extra sounds, enlarged heart, pacemaker, implantable defibrillator.			11. Spine, other musculoskeletal	Previous surgery, deformities, limitation of motion, tenderness.		
6. Lungs and chest, not including breast examination	Abnormal chest wall expansion, abnormal respiratory rate, abnormal breath sounds including wheezes or alveolar rales, impaired respiratory function, cyanosis. Abnormal findings on physical exam may require further testing such as pulmonary tests and/ or xray of chest.			12. Neurological	Impaired equilibrium, coordination or speech pattern; asymmetric deep tendon reflexes, sensory or positional abnormalities, abnormal patellar and Babinski's reflexes, ataxia.		

*COMMENTS: _____

Note certification status here. See Instructions to the Medical Examiner for guidance.

- Meets standards in 49 CFR 391.41; qualifies for 2 year certificate
- Does not meet standards
- Meets standards, but periodic monitoring required due to _____
 Driver qualified only for: 3 months 6 months 1 year Other
- Temporarily disqualified due to (condition or medication): _____
- Return to medical examiner's office for follow up on _____

- Wearing corrective lense
- Wearing hearing aid
- Accompanied by a _____ waiver/ exemption. Driver must present exemption at time of certification.
- Skill Performance Evaluation (SPE) Certificate
- Driving within an exempt intracity zone (See 49 CFR 391.62)
- Qualified by operation of 49 CFR 391.64
- Medical Examiner's signature _____
- Medical Examiner's name _____
- Address _____
- Telephone Number _____

If meets standards, complete a Medical Examiner's Certificate as stated in 49 CFR 391.43(h). (Driver must carry certificate when operating a commercial vehicle.)

MEDICAL EXAMINER'S CERTIFICATE

I certify that I have examined _____ in accordance with the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and with knowledge of the driving duties, I find this person is qualified; and, if applicable, only when:

- | | |
|--|--|
| <input type="checkbox"/> wearing corrective lenses | <input type="checkbox"/> driving within an exempt intracity zone (49 CFR 391.52) |
| <input type="checkbox"/> wearing hearing aid | <input type="checkbox"/> accompanied by a Skill Performance Evaluation Certificate (SPE) |
| <input type="checkbox"/> accompanied by a _____ waiver exemption | <input type="checkbox"/> Qualified by operation of 49 CFR 391.64 |

The information I have provided regarding this physical examination is true and complete. A complete examination form with any attachment embodies my findings completely and correctly, and is on file in my office.

SIGNATURE OF MEDICAL EXAMINER		TELEPHONE	DATE
MEDICAL EXAMINER'S NAME (PRINT)		<input type="checkbox"/> MD <input type="checkbox"/> DO	<input type="checkbox"/> Chiropractor
		<input type="checkbox"/> Physician Assistant	<input type="checkbox"/> Advanced Practice Nurse
MEDICAL EXAMINER'S LICENSE OR CERTIFICATE NO./ISSUING STATE			
SIGNATURE OF DRIVER		DRIVER'S LICENSE NO.	STATE
ADDRESS OF DRIVER			
MEDICAL CERTIFICATE EXPIRATION DATE			

BUS DRIVER'S VEHICLE CONDITION and INSPECTION REPORT



A typical inspection report should be filled out in duplicate in the following manner:

Name of Driver: *(print name)* _____

Status of Driver: Volunteer School Employee Contracted Driver from outside agency

Company/School: _____ Bus No. _____

COMPLETE FULL NAME

#ON VEHICLE

Odometer Reading _____

MILEAGE BEFORE STARTING

Ending Mileage: _____ Date: _____

END OF DAY OR TRIP

MM/DD/YY

Start Mileage: _____ Time: _____ AM PM / _____ AM PM

SAME AS ODOMETER

TIME START

TIME END

Total Mileage: _____ Location: _____

SUBTRACT START FROM ENDING MILEAGE

WHERE VEHICLE IS PARKED CITY, STATE

Inspect Items Listed – If Defective, Number and Describe in "Remarks" (If ok, place a check; if not applicable, place an X.) For exterior check, the DMV requires the engine off, key in hand, wheels chocked, for the CDL pre-trip walk around inspection.

- | | | |
|--|---|----------------------|
| ___ Fluid leaks under bus | ___ Emergency door & buzzer | ___ Transmission |
| ___ Loose wires, hose connections or belts in engine compartment | ___ Highlights, flashers & 4-way flashers | ___ Exhaust system |
| ___ Oil Level | ___ Right front tire and wheel | ___ Battery |
| ___ Radiator coolant level | ___ Front of bus – windshield | ___ Horn |
| ___ Unusual engine noise | ___ Left front tire & wheel | ___ Switches |
| | ___ Stop arm (school bus) | ___ Wipers & washers |

Inspection Report (cont.)

___ Stop arm control (warning control)

___ Left side of bus – windows & lights (secure/ working)

___ Gauges & warning lights

___ Left rear tire & wheels(secure/ properly inflated)

___ Fans & defrosters(secure/working)

___ Rear of bus – windows & lights

___ Driver’s seat and belt

___ Tail pipe (secure)

___ Inside & outside mirrors(secure)

___ Right rear tires & wheels (secure/ properly inflated)

___ Directional lights (working)

___ Right side of bus – windows & lights

___ Brake pedal and warning lights

___ Parking brake or service brake (working)

___ Operation of service door

___ Clutch

___ Emergency equipment

___ Steering

___ First aid kit (complete)

___ Wheelchair lift

___ Entrance step

___ Cleanliness of interior

___ Condition of floor

Remarks _____ [# AND EXPLAIN ABOVE DEFECT(S)]

Condition of Above Vehicle: (check one) Satisfactory Unsatisfactory

Driver’s Signature: _____

MUST BE SIGNED - LEGIBLE SIGNATURE

Above Defects Corrected Above Defects Need Not Be Corrected For Safe Operation Of Vehicle

Mechanic’s Signature: _____ Date: _____

Driver Reviewing Repairs: _____ Date: _____