Transportation Log

Name of Child Care Facility/Home/Large Family Child Care Home: _____

Driver Instructions: Before transporting the children, the driver must record the current date, departure location and departure time, destination, each child's first and last name, and place an "X" in the "In Vehicle" column for each child as the child enters the vehicle. Upon arrival at the destination, the driver must: (1) Record the arrival time, (2) Watch each child exit the vehicle and place an "X" in the "Out of vehicle" column after each child has exited the vehicle, (3) Conduct a physical inspection and visual sweep of the entire vehicle, including all rows, seats, and under seats to ensure all children have exited the vehicle and no children were left in the vehicle, and (4) Immediately sign and date the log after the physical inspection and visual sweep, attesting all children have exited the vehicle.

2nd Staff Member Instructions (Child Care Facilities Only): Upon arrival at the destination, a 2nd staff member must: (1) Conduct a physical inspection and visual sweep of the entire vehicle, including all rows, seats, and under seats to ensure all children have exited the vehicle and no children were left in the vehicle, and (2) Sign and date the log immediately after conducting the physical inspection and visual sweep, attesting all children have exited the vehicle.

,	Date (mm/dd/yy): / /			Date (mm/dd/yy): / /			Date (mm/dd/yy): / /			Date (mm/dd/yy	Date (mm/dd/yy): / /		
	Departure Location:			Departure Location:			Departure Location:			Departure Loca	Departure Location:		
	Destination:			Destination:			Destination:			Destination:			
	Time of Departure:: AM PM			Time of Departure:: AM PM			Time of Departure:: AM PM			Time of Departure:: AM PM			
	Time of Arrival: AM PM			Time of Arrival: AM PM			Time of Arrival: AM PM			Time of Arrival: AM PM			
Child's Name (First Last)	In vehicle	Out of vehicle	1	In vehicle	Out of vehicle		In vehicle	Out of vehicle		In vehicle	Out of vehicle	1	
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By signing below, I attest to the following	: (1) I have perfor	med a physical ir	spection	and visual sweep	of the entire vehic	le from fro	ont to back, incluc	ing all rows, seate	and und	der seats, (2) All ch	ildren safely exiter	d the	
vehicle and are accounted for, and (3) No	o children were lef	it in the vehicle.					-			<u> </u>			
Signature of Driver/Date													
	 												
Signature of 2 nd Staff Member/Date (Child Care Facilities Only)													