DRIVER'S ATTENDANCE LOG

for

_____

Date (month/week of)

Key: / = on Bus X = Off Bus A = Absent Destination: _____

NAME OF CHILD	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Time of Departure										
Time of Arrival										
My signature below each date verifies that I have conducted a physical inspection of the vehicle and a visual sweep of the vehicle to ensure that no child is left in the vehicle. At a minimum, the signature must include first initial and complete last name.										
Driver's signature AM										
Staff's signature AM										
Driver's signature PM										
Staff's signature PM										