SCHOOL BUS SAFETY INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Exterior & Lighting

☐ Yes ☐ No — Headlights, tail lights, and turn signals function

☐ Yes ☐ No — Stop arm and warning lights deploy correctly

☐ Yes ☐ No — Mirrors are properly adjusted and secure

☐ Yes ☐ No — Body panels and bumpers are free of damage

Interior & Safety Equipment

☐ Yes ☐ No — Seats and floor are clean and free of hazards

☐ Yes ☐ No — Emergency exits and alarms are fully operational

☐ Yes ☐ No — Fire extinguisher is charged and first aid kit is present

☐ Yes ☐ No — Seat belts and driver controls are in good condition

Mechanical & Engine

☐ Yes ☐ No — Fluid levels are within recommended ranges

☐ Yes ☐ No — Belts and hoses show no signs of wear or leaks

☐ Yes ☐ No — Battery terminals are clean and connections are tight

☐ Yes ☐ No — Engine starts easily and runs without unusual noise

Tires & Braking System

☐ Yes ☐ No — Tire tread depth and pressure meet safety standards

☐ Yes ☐ No — Brake pedal feel and response are firm and consistent

☐ Yes ☐ No — Parking brake holds the vehicle securely on an incline

☐ Yes ☐ No — Wheels and lug nuts are secure with no visible cracks

FINAL NOTES

Inspector Comments:

_____

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_____

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

☐ **I confirm this inspection was completed accurately**