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|---------------------------|--|---|-----------|-----|----|----|-----|------|--|----------|--|-----------|--|
| Today's Date: | | The DVCR is a legally required document stating that the driver has thoroughly inspected all critical safety items for proper operation before departing on a trip. | | | | | | | | | | | |
| Date Needed: | | | | | | | | | | | | | |
| Destination: of Trip: | | | | | | | | | | | | | |
| Driver Need: | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Yes</td> <td style="width:10%;">No</td> <td style="width:40%;"></td> <td style="width:15%;"></td> <td style="width:15%;"></td> <td style="width:15%;"></td> </tr> </table> | Yes | No | | | | | ITEM | | Pre-Trip | | Post-Trip | |
| Yes | No | | | | | | | | | | | | |
| (If so) Name: | | | AM | MID | PM | AM | MID | PM | | | | | |
| Requested by: | | Directions: place "V" if attend. Is needed | | | | | | | | | | | |
| Approved by: | | 1. Engine Warm Up | | | | | | | | | | | |
| | | 2. Brake Air Press: | | | | | | | | | | | |
| | | 3. Break Test: Applied Pressure | | | | | | | | | | | |
| | | 4. Brake Operation: Stopping, Parking | | | | | | | | | | | |
| Driver Trip Report | | 5. Leaks: Oil, Fuel, Coolant | | | | | | | | | | | |
| Vehicle No.: | | 6. Lights: Loading, Head, Parking | | | | | | | | | | | |
| Driver: | | 7. Horn & Gauges: Fuel, Temp, air | | | | | | | | | | | |
| Departure Time: | | 8. Valid Insurance & State Documents | | | | | | | | | | | |
| Return Time: | | 9. Alarms: Emergency Door, back up. | | | | | | | | | | | |
| # Children Transported: | | 10. Driver Seat & Seatbelt | | | | | | | | | | | |
| | | 11. Windshield Wiper & Washer | | | | | | | | | | | |
| | | 12. Emer. Equip.: 1st Aid, reflectors, radio | | | | | | | | | | | |
| | | 13. Handrail/ Entrance Door | | | | | | | | | | | |
| ODOMOMTER READING | | 14. Seats: Cushions Secure | | | | | | | | | | | |
| Ending: | | 15. Heating, Ventilation & AC | | | | | | | | | | | |
| Beginning: | | 16. All Glass & Mirrors adjusted & tighten | | | | | | | | | | | |
| Total Mileage: | | 17. Tires, Wheels & Lug Nut | | | | | | | | | | | |
| | | 18. Wheel Chair Lift & Tie | | | | | | | | | | | |
| | | 19. Body Damage | | | | | | | | | | | |
| | | 21. End of Run Passenger Check. | | | | | | | | | | | |
| Please Circle One: | | Driver's Written Request for Repairs: _____ | | | | | | | | | | | |
| Elem. | JH | | | | | | | HS | | | | | |
| Purpose of Trip | | Reporting Driver: _____ AM _____ MID _____ | | | | | | | | | | | |
| Please Circle One: | | | | | | | | | | | | | |
| Football | Basketball | Printed Name: _____ | | | | | | | | | | | |
| Volleyball | Baseball | | | | | | | | | | | | |
| Softball | Powerlifting | Signature: _____ | | | | | | | | | | | |
| Track | X-Country | | | | | | | | | | | | |
| Golf | Tennis | Garage Actions: _____ | | | | | | | | | | | |
| Band | Ag. | | | | | | | | | | | | |
| UIL | Field Trip | Date: _____ Time: _____ AM _____ | | | | | | | | | | | |
| Other | | | | | | | | | | | | | |
| | | Technician Signature: _____ | | | | | | | | | | | |
| | | Garage Remarks | | | | | | | | | | | |