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):__ /__/__ Departure Location:_____ Destination:_____ Departure Time __ : __ AM PM Arrival Time __ :__ AM PM			Date (mm/dd/yy):__ /__/__ Departure Location:_____ Destination:_____ Departure Time __ : __ AM PM Arrival Time __ :__ AM PM			Date (mm/dd/yy):__ /__/__ Departure Location:_____ Destination:_____ Departure Time __ : __ AM PM Arrival Time __ :__ AM PM			Date (mm/dd/yy):__ /__/__ Departure Location:_____ Destination:_____ Departure Time __ : __ AM PM Arrival Time __ :__ AM PM			Date (mm/dd/yy):__ /__/__ Departure Location:_____ Destination:_____ Departure Time __ : __ AM PM Arrival Time __ :__ AM PM		
Child's Name (First Last)	**In vehicle**	**Out of vehicle**		**In vehicle**	**Out of vehicle**		**In vehicle**	**Out of vehicle**		**In vehicle**	**Out of vehicle**		**In vehicle**	**Out of vehicle**	
			VISUAL SWEEP			VISUAL SWEEP			VISUAL SWEEP			VISUAL SWEEP			VISUAL SWEEP
By signing below, I attest to the following: (1) I have performed a physical inspection and visual sweep of the entire vehicle from front to back, including all rows, seats and under seats, (2) All children safely exited the vehicle and are accounted for, and (3) No children were left in the vehicle.															
Signature of Driver/Date															
Signature of 2nd Staff /Date (Facilities only)															