



Special Needs Assistant Training

Albemarle County Public Schools
Transportation Services

Special Needs: In the context of children at school

Particular educational requirements resulting from:

- ❖ Learning difficulties
- ❖ Physical disabilities
- ❖ Emotional and behavioral difficulties.



IEP: Individualized Education Program



An IEP is a document that is developed for each public school student who meets the requirements for specialized education.

- ❖ An IEP is a team effort.
- ❖ Guidance counselor, parent, special needs teachers and staff such as child nutrition, occupational therapy, physical therapy and a Transportation Representative (Renee DeVall) attend on behalf of the student.
- ❖ Laws and criteria regarding students with disabilities govern the meetings and final educational plan for each student.

Renee DeVall ~ Transportation Specialist Routing & Special Needs

- ❖ Renee attends IEP meetings as needed to represent Transportation
- ❖ Renee is the special needs contact person for the county
- ❖ Renee will be your first point of contact should you-
 - ❖ Have questions regarding special needs equipment (sizes, securement, etc..)
 - ❖ Have questions regarding a student's IEP
 - ❖ Need strategies to handle the challenges of working with your students

Accommodations



- ❖ Adaptive equipment and specialized learning tools.
- ❖ Special accommodations must be agreed upon in the student's IEP.
- ❖ Once accommodations are written in the IEP, they are mandated and must be followed under Federal Law.
- ❖ Accommodations include: physical equipment, visuals (pictures), behavior management procedures, modified tests or assignments, and transportation modifications.

Physical Accommodations

❖ Mobility aids

Wheelchairs, walkers, crutches

❖ Protective equipment

Helmets, harness/safety vests

❖ Environmental conditions

Temperature control such as AC, noise level, lighting



Types of Special Needs: ADD & ADHD



Attention Deficit Disorder:

- ❖ Students with ADD have a deficit in their ability to pay attention and to stay on task.
- ❖ On the outside they appear perfectly normal and often their behavior is misunderstood.
- ❖ They may have problems staying seated, following directions for a prolonged period of time, and focusing on multiple directives.
- ❖ Keep directions simple, and repeat often
- ❖ Be consistent and patient

Types of Special Needs: ADD & ADHD

Attention Deficit Hyperactivity Disorder:

- ❖ Students with **ADHD** have elements of **ADD** with the added struggle of being hyperactive.
- ❖ Can be dangerously impulsive
- ❖ May be noisy, destructive, and fidgety
- ❖ Give clear, simple directions
- ❖ Be patient, you may have to repeat directions multiple times.
- ❖ Keep in mind you are not being ignored, they simply have a hard time focusing, especially with the added stimulation of a crowded bus.



Types of Special Needs: Autism



Autism: refers to a broad range of conditions characterized by challenges with social skills, repetitive behaviors, speech and nonverbal communication, as well as by unique strengths and differences.

Some characteristics include:

- ❖ Difficulty communicating with others, and may avoid eye contact
- ❖ Repetitious behaviors, such as rocking back and forth, head banging, touching or twirling objects, obsession with certain objects.
- ❖ Limited range of interests in people or activities
- ❖ May have an intolerance to even slight changes in their environment or daily routine

Autism Continued...



- ❖ May have slower processing abilities and may take up to 45 seconds to respond to a question or request. (This does not reflect their level of intelligence which might possibly be very high.)
- ❖ May have "inappropriate" reactions -such as laughing in a tense situation.
- ❖ May have seemingly strange fears and reactions to noises and other stimuli.
- ❖ Might appear self-abusive: banging head, slapping, pinching, biting themselves.
- ❖ Like all children, Autistic children are unique. Some are withdrawn while others are aggressive and hyperactive.

Tips to Assisting Autistic Students:



1. Use concise, simple directions with a firm, but gentle voice. Never yell or demand.
2. Non-verbal cues are usually best. Allow student time to process information.
3. Do not try to force eye contact.
4. Consciously ignore behaviors that are not a threat to you or other students on the bus.
5. Try to prepare students for upcoming changes in routine.
6. If there is a potential safety issue, step in right away. Alert the driver that you need them pull over to a safe location.

Pictures and Non-Verbal Communication



- ❖ Our greatest asset with many special needs students is visuals (pictures).
- ❖ Visuals are clear, direct, and nonthreatening.
- ❖ If you need ideas, suggestions, or training in communicating with children using visuals, contact Renee DeVall.

Communication Cards



Tablet



Communication Book

Talker



Types of Special Needs: Hearing & Visual Impairment



Deafness: a severe hearing impairment marked by an inability to process words or sounds.

Hearing Impairment: hearing loss that might be temporary or permanent and represents varying degrees of hearing ability.

- ❖ May use hearing aids, lip read, use sign language, or use an electronic device such as a tablet.
- ❖ Deafness and Hearing Impairments do not reflect the student's intelligence.
- ❖ Learn how to communicate and become familiar with how to address each student.

Types of Special Needs: Hearing and Visual Impairment Cont....



Visual Impairment: Any kind of blindness or partial vision

- ❖ Might be completely blind, may see shapes, shades of light, or may lack peripheral vision.
- ❖ May use corrective lenses, cane, computer devices, or a seeing eye dog.
- ❖ Require differing levels of assistance. Some need you to take them to their seats and some require no help at all. Be sensitive to their level of ability.
- ❖ Speak clearly, be direct and use a friendly tone.

Hearing & Visual Impairment



Deaf-blindness: Visual and hearing impairments at the same time.

- ❖ May suffer from sensory deprivation, and may unknowingly express distress by getting very loud.
- ❖ Communication must be through touch such as signing into a student's hand, or a reassuring pat on the shoulder. Use calm touch for general attention and firm touch for emergency situations
- ❖ Routine is crucial -assigned seats are a must. Be consistent, compassionate and very patient.

Types of Special Needs: Emotional Disability



Emotional Disability: A student will show one or more of the following conditions for a prolonged period of time:

- ❖ Schizophrenia and bipolar disorder
- ❖ Unexplained inability to learn not seemingly caused by a physical or biological reason.
- ❖ Inability to maintain interpersonal relationships with teachers or other students.
- ❖ Inappropriate feelings or behavior such as aggression or self-abuse.
- ❖ Consistently in an unhappy or depressed mood.
- ❖ Severe immaturity -temper tantrums, inappropriate crying.

Emotional Disability Continued...

- Students may exhibit challenging behaviors.
 - Not staying in their seat
 - Name calling and cursing
 - Spitting, hitting, and fighting
 - Screaming
 - Threatening and picking on other students, driver, or assistant
 - Dangerous behaviors such as jumping out of the emergency door



Emotional Disability Continued...



Tips to assisting students with Emotional Disability:

- ❖ Try not take their behavior personally.
- ❖ Speak to the student by their name, and try not to get caught up in a conflict spiral and stay consistent with the rules.
- ❖ Try to defuse situations before they become out of control.
- ❖ Use positive reinforcement as much as possible.
- ❖ Stay calm. Use a firm, reassuring voice. Do not get into a power struggle.
- ❖ Use caring language:
 - ❖ “I can see that you are angry, but running down the aisle is unsafe.”
 - ❖ “Please sit down; it is unsafe for you to stand while the bus is moving.”
 - ❖ “I’ll be happy to talk with you when you are feeling less stressed.”

Types of Special Needs: Intellectual Disability

Intellectual Disability: Developmentally-delayed children born with less than average intelligence, less than average ability to learn, and low functioning skills.

- ❖ The delay can be mild to profound.
- ❖ May have difficulty memorizing and understanding safety rules.
- ❖ May innocently act or react inappropriately.
- ❖ Can be very loving, affectionate and sensitive.
- ❖ Explain your expectations simply, but not condescendingly.
- ❖ Be patient with their lack of understanding.
- ❖ Use clear, simple, easy to follow instructions.



Types of Special Needs: Orthopedic Impairment



Orthopedic Impairment: A bodily impairment severe enough to affect a student's educational performance.

- ❖ Non-accessible transportation due to severity of impairment.
- ❖ Trouble maneuvering around the classroom - wheel chairs, crutches, canes
- ❖ Difficulty navigating school hallways
- ❖ Earning mandated physical education credit
- ❖ Always ASK FIRST before assisting a student with an orthopedic impairment. Respect their independence! Many are very capable of boarding and un-boarding the bus by themselves.



Types of Special Needs: Multiple Disabilities

Multiple Disabilities: a student that has more than one disability.

- ❖ Often these students need to be closely monitored for health reasons.
- ❖ Learn non-verbal communication cues to help assess student's needs.
- ❖ Give positive attention whenever possible.
- ❖ Ask for training and assistance whenever you are unsure of how to safely transport any student.



Types of Special Needs: Traumatic Brain Injury



Traumatic Brain Injury: An accident or head injury that is so severe that it creates a disability in an otherwise non-disabled child.

- ❖ The student was not born with the disability and may become understandably upset and frustrated with learning how to cope with the new lack of independence.
- ❖ Can suffer from depression and exhibit behavior problems.
- ❖ Be patient and compassionate.

Transportation Health Plans:



Sometimes, it is necessary to have a plan in place to accommodate specific special health concerns. A few examples include:

- ❖ Asthma Action Plan
- ❖ Seizure Plan of Care
- ❖ Food Allergy Action Plan
- ❖ Diabetic Health Treatment Plan

Examples of Health Care Plans that
MIGHT be found on a manifest.

- ❖ Health Plans can be found on the manifest.
- ❖ Contact Renee if you are given a Health Plan that is not on the manifest.
- ❖ Always seek help if you do not understand or if you feel uncomfortable with your ability to carry out a student's Medical Plan.

We do not transport student medication!

Unless...

The parent or legal guardian has signed and given a “Self-care Administer” form.
(Epi-pens, inhalers, insulin, etc.)

Students are not to be in possession of medication (prescribed or over-the-counter) at any time. All medications must be taken to the clinic and will be administered by a parent/guardian or designated adult per guidelines in accordance with School Board policy. Additional information regarding students needing inhaled medication for asthma is available in the school clinic. Medications needed during field trips are likewise handled through the school clinic and require written consent from the parent in order to be administered while on a field trip. – Behavior Management Handbook

Everyone is Unique~



- ❖ Some students have severe impairments while others have impairments which are so mild it can be hard to tell they have a disability.
- ❖ Students with special needs have good days and bad days like everyone else.
- ❖ Students with special needs may also be impacted by cultural/language barriers.

Occupant Safety Restraints

Occupant Safety Restraints:

- ❖ Harness/safety vest
- ❖ Car seats/booster seats
- ❖ Over the Shoulder Harness



Please remember...



- ❖ Unless it is documented on a student's IEP, never place a child in any type of restraint.
- ❖ All students have the right to LRE or the Least Restrictive Environment

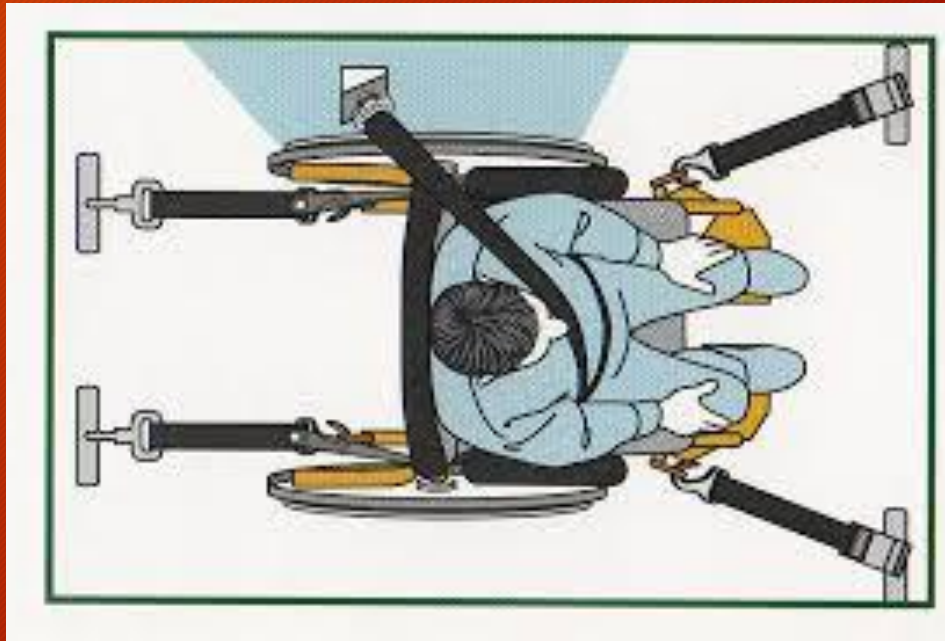
It's the law:

"To the maximum extent appropriate, children with disabilities are to be included with their non-disabled peers" 8-VAC-20-81-10

Wheelchair Securement:

Wheelchair **MUST** be facing forward →

Anchored straps must
be inside the
wheelchair
In the back.



Anchored straps must be
outside
The wheelchair in the front

Anchored 3 point shoulder restraint should fit comfortably across the shoulder and fit snugly over the hips. (Do not place the lap belt over the abdomen.)

Confidentiality & F.E.R.P.A

- ❖ FERPA: The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99)
- ❖ Federal law protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.
- ❖ FERPA is Federally Mandated. Student information and academic records are to be kept strictly confidential.

Special Needs On-Boarding

Albemarle County Public Schools
Transportation Services
SPED Onboarding Training
SPED Drivers, Assistants & Van Drivers

Before You Are On the Bus:

- ✓Special Needs Classroom instruction
- ✓Wheelchair securement training
- ✓Car seat, booster seat, and harness training
- ✓On the job training with your specific students on your bus
- ✓Meet with your Lead Driver (Supervisor) for your base school

Special Concerns: Seizures

- ❖ Stay Calm, Lay student on the floor of the bus on his/her left side with something soft under his head to keep the airway clear should fluid collect in the mouth. Do not put anything between the teeth, or try to take food or anything out of the mouth.
- ❖ The student will not swallow their tongue during a seizure.
- ❖ Remove any object (backpack, etc.) that could be dangerous.
- ❖ Always monitor for respiratory distress.

Seizures:

1. Return to school and contact dispatch & have them alert the school, 911 if nurse is not at school & the parents to meet bus at the school.
2. Farther than 5 minutes from school or home: Contact dispatch to contact parents and 911.

*In either case, emergency personnel will administer DIASTAT if necessary.
(Medicine for seizures lasting longer than 5 minutes.)*

3. Less than 5 minutes from home: Contact dispatch to contact 911 & parents and take student straight home before continuing on route.

Seizures:

- “Absence” seizure: May look like simple daydreaming, slowly approach the student and gently touch the student’s arm.
- ❖ Never shout: The child having the seizure can’t hear you, and you’ll only frighten others on the bus.
 - ❖ Keep a record of each seizure. How long did it last? Any concerns?
 - ❖ Explain the incident in the student’s Health and Wellbeing notebook.

the 1990s, the number of people in the United States who are 65 years of age or older has increased by 50 percent, and the number of people 75 years of age or older has increased by 100 percent. The number of people 85 years of age or older has increased by 200 percent. The number of people 90 years of age or older has increased by 400 percent. The number of people 95 years of age or older has increased by 800 percent. The number of people 100 years of age or older has increased by 1,600 percent. The number of people 105 years of age or older has increased by 3,200 percent. The number of people 110 years of age or older has increased by 6,400 percent. The number of people 115 years of age or older has increased by 12,800 percent. The number of people 120 years of age or older has increased by 25,600 percent. The number of people 125 years of age or older has increased by 51,200 percent. The number of people 130 years of age or older has increased by 102,400 percent. The number of people 135 years of age or older has increased by 204,800 percent. The number of people 140 years of age or older has increased by 409,600 percent. The number of people 145 years of age or older has increased by 819,200 percent. The number of people 150 years of age or older has increased by 1,638,400 percent. The number of people 155 years of age or older has increased by 3,276,800 percent. The number of people 160 years of age or older has increased by 6,553,600 percent. The number of people 165 years of age or older has increased by 13,107,200 percent. The number of people 170 years of age or older has increased by 26,214,400 percent. The number of people 175 years of age or older has increased by 52,428,800 percent. The number of people 180 years of age or older has increased by 104,857,600 percent. The number of people 185 years of age or older has increased by 209,715,200 percent. The number of people 190 years of age or older has increased by 419,430,400 percent. The number of people 195 years of age or older has increased by 838,860,800 percent. The number of people 200 years of age or older has increased by 1,677,721,600 percent. The number of people 205 years of age or older has increased by 3,355,443,200 percent. The number of people 210 years of age or older has increased by 6,710,886,400 percent. The number of people 215 years of age or older has increased by 13,421,772,800 percent. The number of people 220 years of age or older has increased by 26,843,545,600 percent. The number of people 225 years of age or older has increased by 53,687,091,200 percent. The number of people 230 years of age or older has increased by 107,374,182,400 percent. The number of people 235 years of age or older has increased by 214,748,364,800 percent. The number of people 240 years of age or older has increased by 429,496,729,600 percent. The number of people 245 years of age or older has increased by 858,993,459,200 percent. The number of people 250 years of age or older has increased by 1,717,986,918,400 percent. The number of people 255 years of age or older has increased by 3,435,973,836,800 percent. The number of people 260 years of age or older has increased by 6,871,947,673,600 percent. The number of people 265 years of age or older has increased by 13,743,895,347,200 percent. The number of people 270 years of age or older has increased by 27,487,790,694,400 percent. The number of people 275 years of age or older has increased by 54,975,581,388,800 percent. The number of people 280 years of age or older has increased by 109,951,162,777,600 percent. The number of people 285 years of age or older has increased by 219,902,325,555,200 percent. The number of people 290 years of age or older has increased by 439,804,651,110,400 percent. The number of people 295 years of age or older has increased by 879,609,302,220,800 percent. The number of people 300 years of age or older has increased by 1,759,218,604,441,600 percent. The number of people 305 years of age or older has increased by 3,518,437,208,883,200 percent. The number of people 310 years of age or older has increased by 7,036,874,417,766,400 percent. The number of people 315 years of age or older has increased by 14,073,748,835,532,800 percent. The number of people 320 years of age or older has increased by 28,147,497,671,065,600 percent. The number of people 325 years of age or older has increased by 56,294,995,342,131,200 percent. The number of people 330 years of age or older has increased by 112,589,990,684,262,400 percent. The number of people 335 years of age or older has increased by 225,179,981,368,524,800 percent. The number of people 340 years of age or older has increased by 450,359,962,737,049,600 percent. The number of people 345 years of age or older has increased by 900,719,925,474,099,200 percent. The number of people 350 years of age or older has increased by 1,801,439,850,948,198,400 percent. The number of people 355 years of age or older has increased by 3,602,879,701,896,396,800 percent. The number of people 360 years of age or older has increased by 7,205,759,403,792,793,600 percent. The number of people 365 years of age or older has increased by 14,411,518,807,585,587,200 percent. The number of people 370 years of age or older has increased by 28,823,037,615,171,174,400 percent. The number of people 375 years of age or older has increased by 57,646,075,230,342,348,800 percent. The number of people 380 years of age or older has increased by 115,292,150,460,684,697,600 percent. The number of people 385 years of age or older has increased by 230,584,300,921,369,395,200 percent. The number of people 390 years of age or older has increased by 461,168,601,842,738,790,400 percent. The number of people 395 years of age or older has increased by 922,337,203,685,477,580,800 percent. The number of people 400 years of age or older has increased by 1,844,674,407,370,955,161,600 percent. The number of people 405 years of age or older has increased by 3,689,348,814,741,910,323,200 percent. The number of people 410 years of age or older has increased by 7,378,697,629,483,820,646,400 percent. The number of people 415 years of age or older has increased by 14,757,395,258,967,641,292,800 percent. The number of people 420 years of age or older has increased by 29,514,790,517,935,282,585,600 percent. The number of people 425 years of age or older has increased by 59,029,581,035,870,565,171,200 percent. The number of people 430 years of age or older has increased by 118,059,162,071,741,130,342,400 percent. The number of people 435 years of age or older has increased by 236,118,324,143,482,260,684,800 percent. The number of people 440 years of age or older has increased by 472,236,648,286,964,521,369,600 percent. The number of people 445 years of age or older has increased by 944,473,296,573,929,042,739,200 percent. The number of people 450 years of age or older has increased by 1,888,946,593,147,858,085,478,400 percent. The number of people 455 years of age or older has increased by 3,777,893,186,295,716,170,956,800 percent. The number of people 460 years of age or older has increased by 7,555,786,372,591,432,341,913,600 percent. The number of people 465 years of age or older has increased by 15,111,572,745,182,864,683,827,200 percent. The number of people 470 years of age or older has increased by 30,223,145,490,365,729,367,654,400 percent. The number of people 475 years of age or older has increased by 60,446,290,980,731,458,735,308,800 percent. The number of people 480 years of age or older has increased by 120,892,581,961,462,917,470,617,600 percent. The number of people 485 years of age or older has increased by 241,785,163,922,925,834,941,235,200 percent. The number of people 490 years of age or older has increased by 483,570,327,845,851,669,882,470,400 percent. The number of people 495 years of age or older has increased by 967,140,655,691,703,339,764,940,800 percent. The number of people 500 years of age or older has increased by 1,934,281,311,383,406,679,529,881,600 percent. The number of people 505 years of age or older has increased by 3,868,562,622,766,813,359,059,763,200 percent. The number of people 510 years of age or older has increased by 7,737,125,245,533,626,718,119,526,400 percent. The number of people 515 years of age or older has increased by 15,474,250,491,067,253,436,239,052,800 percent. The number of people 520 years of age or older has increased by 30,948,500,982,134,506,872,478,105,600 percent. The number of people 525 years of age or older has increased by 61,897,001,964,269,013,744,956,211,200 percent. The number of people 530 years of age or older has increased by 123,794,003,928,538,027,489,912,422,400 percent. The number of people 535 years of age or older has increased by 247,588,007,857,076,054,979,824,844,800 percent. The number of people 540 years of age or older has increased by 495,176,015,714,152,109,959,649,689,600 percent. The number of people 545 years of age or older has increased by 990,352,031,428,304,219,919,299,379,200 percent. The number of people 550 years of age or older has increased by 1,980,704,062,856,608,439,838,598,758,400 percent. The number of people 555 years of age or older has increased by 3,961,408,125,713,216,879,677,197,516,800 percent. The number of people 560 years of age or older has increased by 7,922,816,251,426,433,759,354,395,033,600 percent. The number of people 565 years of age or older has increased by 15,845,632,502,852,867,518,708,790,067,200 percent. The number of people 570

Albemarle County Public Schools				Date: _____										
				Medicaid										
Pickup	Program Description	Student I	Last, First	Mon		Tue		Wed		Thur		Fri		
Pickup	66			AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	Comments
66	SPED - SP BUS	11021	Shifflett, John											
66	SPED - SP BUS	12201	Howard, Brandy											
66	SPED - SP BUS	13301	Stevens, Justin											

A = Absent
 SD= Snow Day
 S = Suspended
 H = Holiday
 WD = Workday
 X = Present

Week ending : _____
 Drivers Name _____

If you get a new student, write them in until you can come and see me for an update.
 If the student is a sibling, Bright Star, homeless, Enterprise, etc. and not sped please write in the comments **Not Sped**.

Health & Wellbeing Report - Goes in the "Purple Folder"

Student: _____ School: _____ Bus: _____

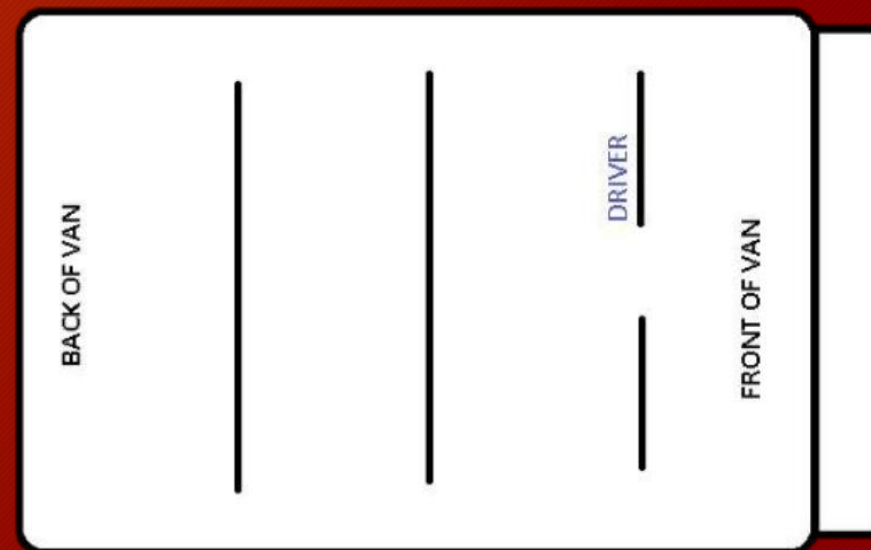
Date of Incident	Incident	Actions	All that apply	Out come
AM PM		Verbal Warning	<input type="checkbox"/>	
		Talked w/ student	<input type="checkbox"/>	
		Talked w/ parents	<input type="checkbox"/>	
		Notified school	<input type="checkbox"/>	
		Notified Trans	<input type="checkbox"/>	
		Bus Referral	<input type="checkbox"/>	
AM PM		Verbal Warning	<input type="checkbox"/>	
		Talked w/ student	<input type="checkbox"/>	
		Talked w/ parents	<input type="checkbox"/>	
		Notified school	<input type="checkbox"/>	
		Notified Trans	<input type="checkbox"/>	
		Bus Referral	<input type="checkbox"/>	
AM PM		Verbal Warning	<input type="checkbox"/>	
		Talked w/ student	<input type="checkbox"/>	
		Talked w/ parents	<input type="checkbox"/>	
		Notified school	<input type="checkbox"/>	
		Notified Trans	<input type="checkbox"/>	
		Bus Referral	<input type="checkbox"/>	
AM PM		Verbal Warning	<input type="checkbox"/>	
		Talked w/ student	<input type="checkbox"/>	
		Talked w/ parents	<input type="checkbox"/>	
		Notified school	<input type="checkbox"/>	
		Notified Trans	<input type="checkbox"/>	
		Bus Referral	<input type="checkbox"/>	
AM PM		Verbal Warning	<input type="checkbox"/>	
		Talked w/ student	<input type="checkbox"/>	
		Talked w/ parents	<input type="checkbox"/>	
		Notified school	<input type="checkbox"/>	
		Notified Trans	<input type="checkbox"/>	
		Bus Referral	<input type="checkbox"/>	

Bus Driver Seating Chart

BUS #: _____ SCHOOL: _____
 DRIVER NAME: _____ DATE COMPLETED: _____

DRIVER'S SEAT						ENTRANCE DOOR >>
Student #5	Student #2	Student #1		Student #1	Student #2	Student #5
			A			
			I			
			S			
			L			
			E			
EMERGENCY EXIT						

SPED Seating & Evacuation Chart



Pre-trip Form - Must be filled out daily

MONTHLY RECORD OF DAILY PRE-TRIP SAFETY INSPECTIONS (check box if inspected and place an "X" if defect is noted)

Name:		Bus #:		Beginning Mileage:	
Month:				Ending Mileage:	
Comments:				Quarts of Oil Used:	

Month Date:		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
A. UNDER HOOD	am																															
	pm																															
B. INSIDE BUS	am																															
	pm																															
C. TURN ON ALL LIGHTS	am																															
	pm																															
D. RIGHT FRONT TIRE	am																															
	pm																															
E. FRONT OF BUS	am																															
	pm																															
F. LEFT FRONT TIRE	am																															
	pm																															
G. UNDER BUS	am																															
	pm																															
H. LEFT REAR WHEELS	am																															
	pm																															
I. REAR OF BUS	am																															
	pm																															
J. RIGHT REAR WHEELS	am																															
	pm																															
K. FUEL AREA	am																															
	pm																															
L. INSIDE BUS	am																															
	pm																															
M. FINAL CHECK	am																															
	pm																															

DRIVER'S SIGNATURE: _____

Student Injury Report

REPORT OF STUDENT INJURY OCCURRING ON SCHOOL BUS			
DRIVER: _____		BUS #: _____	
DAY/DATE: _____		TIME: _____ A.M./P.M.	
SPECIFIC LOCATION OF BUS: _____			

STUDENT'S NAME	AGE	ADDRESS	PHONE
TYPE OF INJURY: _____			
DESCRIPTION OF INCIDENT: _____			
DRIVER'S SIGNATURE: _____			
=====			
DATE/TIME RECD: _____		PARENT/SCH. NOTIFIED: _____	
STAFF INITIALS: _____			
PT1789.1			

Chain of Command for Non-SPED Student Issues.

If you have any problems or concerns, please go through the proper chain of command. Most issues can easily be handled by your immediate supervisor which is your Lead Driver.

1. Lead Driver
2. ATS -Area Transportation Supervisor
3. Operations Manager, Chuck Leathers
4. Deputy Director, Charmane White
5. Director, Jim Foley

CLICK THE LINK BELOW TO COMPLETE THE SPED
ASSISTANT QUIZ AND THEN SUBMIT.

SPED ASSISTANT QUIZ

