



Emergency Evacuation Drill and Check List

DRIVERS NAME _____ DISTRICT _____

ITEM	DATE	DATE	DATE	DATE	DATE	DATE	DATE
PULL OFF ROAD IN A SAFE LOCATION							
TURN ON EMERGENCY FLASHERS							
SET PARK BRAKE TURN OFF ENGINE							
EVALUATE SITUATION CHECK FOR INJURIES							
COMMUNICATE (CALL DISPATCH)							
CHECK ALL EXITS (BLOCKAGE/DAMAGE)							
POSITION ASSIGNED HELPERS							
DIRECT PASSENGERS TO PROPER EXIT AND EXIT							
CHECK BUS FOR PASSENGERS							
REMOVE EMERGENCY EQUIPMENT							
ACCOUNT FOR PASSENGERS ADMINISTER FIRST AID							

ITEM	DATE	DATE	DATE	DATE	DATE	DATE	DATE
SPECIAL NEEDS REVIEW							
TYPE OF EVACUATION (FRONT/REAR/SIDE)							
DRIVER SIGNATURE/INITIALS							
SUPERVISOR SIGNATURE/INITIALS							