2103.F and 2107.A.1,2,C:					DΛ	PAGE OF				
WEEK OF					FA	GE GF				
	MON	(DATE)	TUE (DA	ATE) WED	(DATE) THU	U (DATE)	FRI (DATE)			
Driver/	АМ		АМ	АМ	АМ		AM			
	PM		РМ	РМ	РМ		PM			
Attendant	АМ		АМ	АМ	АМ		AM			
	PM		РМ	РМ	РМ		РМ			
Attendant/	AM		АМ	АМ	АМ		АМ			
	PM		PM	РМ	PM		РМ			
VISUAL CHECK AM	Time:		Time:	Time:	Time	e:	Time:			
Signature of Individual Conducting Check										
VISUAL CHECK PM	Time:		Time:	Time:	Time	e:	Time:			
Signature of Individual Conducting Check										

BY SIGNING, I CERTIFY THAT I HAVE CONDUCTED A VISUAL CHECK (AT TIME DOCUMENTED) OF THE VEHICLE AFTER ALL CHILDREN WERE UNLOADED AND THAT NO CHILD WAS LEFT IN THE VEHICLE.

CENTER MANAGER REVIEW\_\_\_\_\_\_ DATE\_\_\_\_\_ DATE\_\_\_\_\_

CENTER	BUS #

PAGE	OF				

<b>WEEK OF</b>	OF

AME OF CHILD		MONDAY(DATE)		TUESDAY(DATE)		WEDNESDAY(DATE)		THURSDAY(DATE)		FRIDAY(DATE)
	AM	TIME OF RELEASE:	AM	TIME OF RELEASE:	AM	TIME OF RELEASE:	AM	TIME OF RELEASE:	AM	TIME OF RELEASE:
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ATTENDANCE: In the blocks labeled AM and PM, place the time the child boards the bus in the morning (AM) and when the child boards the bus in the afternoon before departing the facility (PM).

RELEASE OF CHILD: DOCUMENT TIME CHILD IS DROPPED OFF AND THE FULL NAME OF THE PERSON THE CHILD WAS RELEASED TO IS DOCUMENTED.

\*\*\*\*\*PERSON CHILD IS RELEASED TO MUST BE AN AUTHORIZED THIRD PARTY RELEASE.

