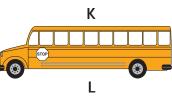
## UNIFORM SCHOOL BUS ACCIDENT/ADJUDICATION REPORT

Date of Accident: /	/ Time of Accident:	□ A.M. □ P.M.			
Day of Week:	School year:				
Driver Name:	Driver SS#:				
Driver License #:	Driver DOB:	Sex: 🗅 Female 🛛 Male			
Location of Accident:					
Location (City, State):					
School District Name:	School District Code:	District Accident #:			
Bus/Unit #: V	ehicle License #:	Bus Body Make:			
Bus Chassis Make: Model \	Year: Bus Owner's Name				
Investigating Agency:	Police Repo	rt # :			
Bus Driver Citation Issued: 🛛 Yes	□ No If yes, type:				
Adjudication: 🗆 Preventable 🛛 Non					
District Signature:					
PART I – SCHOOL BUS PH					
<ul> <li>02 Noncollision</li> <li>03 Pedestrian</li> <li>2. Type of Accident Continued (entional on Pupil struck approaching/leating)</li> <li>02 Pupil struck by other vehicle approaching/leaving stopped</li> </ul>	06   Railroad train     ter only one response):     ving school bus   05     bus   05	(animal, animal-draw vehicle, streetcar) ruck while loading/unloading on ray with flashers in operation truck while stopped at RxR			
<ul> <li>O3 Pupil struck on road by school approaching/leaving school</li> <li>Pupil struck on road by whil leaving zone with school but</li> </ul>	bus 07 Bus st le approaching/ on sh	ing truck while loading/unloading oulder			
3. Complete if Fixed Object (enter	only one response—that which	caused most damage):			
o1 ☐ Embankment o2 ☐ Utility pole o3 ☐ Tree o4 ☐ Sign	<sup>05</sup> ⊡ Guardrail <sup>06</sup> ⊡ Bridgerail <sup>07</sup> ⊡ Fence <sup>08</sup> ⊡ Median barrier	<ul> <li>op□ Fire hydrant</li> <li>10□ Curb or wall</li> <li>11□ Culvert or headwall</li> <li>12□ Other</li> </ul>			
4. Did accident result in (enter only <sup>01</sup> Fatality <sup>02</sup> Incapacitating injury (serious)	<ul> <li>one response):</li> <li>₀₃□ Nonincapacitating injury (mi</li> <li>₀₄□ Possible injury (minor)</li> </ul>	nor) Donly property damage (see below)			
If only property damage occurred, w 05 Less than \$500.00	<i>vas it?</i> ⁰ਯ⊒ \$500.00 or more				

5. Number injured onboard bus: 100 020 003 **Injury Severity Total Number** Pupil Driver Other Fatality Serious Moderate Minor 6. Manner of Collision between Vehicles or Objects: 01 Angle 02 Head-on <sup>03</sup> Rear-end 04 Other 7. Bus Directional Analysis (enter only one response—01 through 28): COLLISION WITH PEDESTRIAN Intersection (see def.) Nonintersection <sup>01</sup> Bus going straight <sup>06</sup> Bus going straight <sup>02</sup> Bus turning right <sup>07</sup> Bus turning right 03 Bus turning left -01 THROUGH 28 <sup>08</sup>□ Bus turning left 04 Bus backing <sup>09</sup> Bus backing 05 Other action 10 Other action COLLISION WITH OTHER VEHICLE Intersection (see def.) Nonintersection 11 Entering at angle, both moving <sup>15</sup> Same direction, both moving RESPONSE <sup>12</sup> Entering same direction, both moving <sup>16</sup> Opposite direction, both moving <sup>13</sup> Entering opposite direction, both moving <sup>17</sup> One vehicle stopped <sup>14</sup> Other action 18 Other action ALL OTHER COLLISIONS ONE Intersection (see def.) Nonintersection ONLY <sup>19</sup> Fixed object 22 Fixed object <sup>20</sup> Other road vehicle, train, pedacycle <sup>23</sup> Other road vehicle, train, pedacycle ENTER ( <sup>21</sup> Other object, animal <sup>24</sup> Other object, animal NONCOLLISION Intersection (see def.) Nonintersection <sup>25</sup> Overturn <sup>27</sup> Overturn <sup>26</sup> Other noncollision <sup>28</sup> Other noncollision 8. First Point of Impact (enter only one response in box): Н J Т Α





<sup>06</sup> \$500.00 or more

9. Contributing Circumstances (enter as many responses as applicable):	22. Indicate Condition of the Road at the Time of the Accident (enter as many responses as applicable)
BUS DRIVER ACTION     VEHICLE DEFECT       01 Speed     10 Tires	01     Dry     03     Under repair     05     Holes or ruts     07     Other       02     Icy     04     Snow packed     06     Muddy
02Right of way—failed to yield11Brakes03Passed stop sign12Lights04Disregarded signal13Steering	23. Light Condition (enter only one response):         01 Dawn       03 Dusk         02 Daylight       04 Dark, artificially illuminated
05       Drove left of center       ROADWAY         06       Improper overtaking       14       Defective surface (i.e., pothole)         07       Make improper turn       15       Slippery         08       Followed too closely       16       Inoperative traffic signal         09       Backing bus       17       View obstructed by object (i.e., tree fe	
10. Posted Speed Limit	□□ Rural □□ □□ Urban PART II – LOADING/UNLOADING ZONE
11. Approximate Speed of Bus	1. At the Time of the Accident, was the Bus (enter only one response)?:         01 Approaching the zone         02 Stopped in the zone         04 Not in sight
12. Driver's Experience Driving School Bus:         01□ Less than 6 months       04□ 3–5 years       07□ 16–20 years	2. Was the pupil? $M \rightarrow Hit by bus M \rightarrow Hit by other vehicle$
<sup>02</sup> □ 1 year or less <sup>05</sup> □ 6–10 years <sup>08</sup> □ 21–25 ye	rs 3. Number injured:
	25 years Injury Severity Total Number Pupil Driver Other
13. How many prior school bus accidents has the driver had?	Fatality       Serious
14. Did the driver receive the pre-service school bus driver training course? or Yes	Moderate         Minor
16. Was the bus driver's lap belt in use when the accident occurred?       oi □ Yes         17. Indicate Type of School Bus:	2 No       4. Location of Injured Pupils:         2 No       01 On side of road       03 In roadway       05 On bus         02 On sidewalk       04 Other
o1 Type A       o2 Type B       o3 Type C       o4 Type D       o5 0         18. Total Number on Bus (including driver)?       =       +       +	her         DESCRIPTION OF ACCIDENT:           +
19. Bus Rated Seating Capacity?	
20. School Bus Use at the Time of Accident: <sup>01</sup> Regular route <sup>03</sup> Special education use	District Accident #:
02     Field/activity trip (school-related use)     04     Other use       21. Indicate Type of Road:     04     Other use	Name (please print):Title:Title:
Number of Lanes: 01 One 02 Two 03 Three 04 Four 05 Five 06 Six 07	Parking lot Signature: Date:
Road Design/Surface: 01 Undivided 03 Painted divider 05 Physical divider	District Contact Person: Phone #:
<sup>02</sup> □ Paved <sup>04</sup> □ Unpaved <sup>06</sup> □ One way	Send report to School Transportation Bureau via email or mail to 300 Don Gaspar Ave. Santa

	I Show packed					
. Light Condition	(enter only one response):	:				
⁰1❑ Dawn	03 Dusk		<sup>05</sup> □ Dark, not artifi	cially illuminated		
⁰2❑ Daylight	⁰4⊐ Dark, artifici	ally illuminated				
. Weather Conditi	ion (enter only one respor	nse):				
<sup>01</sup> □ Clear		⁰5□ Snowing	<sup>07</sup> ❑ Smog/Smoke			
<sup>02</sup> □ Sleeting	₀₄⊐ Fog	₀⊡ Dust	08 Other			
	only one response):					
<sup>01</sup> □ Rural	02 Urban					
ART II – LOAD	DING/UNLOADING	ZONE				
At the Time of the	e Accident, was the Bus	(enter only one resp	oonse)?:			
<sup>01</sup> Approaching	□ Approaching the zone <sup>03</sup> □ Leaving the zone					
<sup>02</sup> Stopped in th	2□ Stopped in the zone 04□ Not in sight					
Was the pupil?	on Hit by bus	2 Hit by other ve	hicle			
Number injured:		200	040	006		
njury Severity	Total Number	Pupil	Driver	Other		
atality						
Serious						
Noderate						
<i>l</i> linor						
Location of Injure	Location of Injured Pupils:					
<sup>01</sup> □ On side of road <sup>03</sup> □ In roadway <sup>05</sup> □ On bus						
<sup>02</sup> □ On sidewalk	04 🗖 🕻	Other				
ESCRIPTION OF ACCIDENT:						
	ACCIDENT					
	<u>.</u>					
		D	istrict Accident #:			
<i>port Submitted by:</i> ne (please print):Title:Title:						
nature: Date:						
strict Contact Pers	rict Contact Person: Phone #:					
nd upport to 0.1	ol Trononostation D		ail to 200 Date Cours	an Arra Carta		
nu report to Scho	ool Transportation Bure	eau via email or n	ian to 500 Don Gasp	ai Ave. Santa		

Revised 09/2024