

Emergency School Bus Evacuation Drill School Form School Level Certification Form

School District: Alachua		School Na	ne:	
School Year:	_ Semester:	$1^{st} \square 2^{nd} \square$	Month:	Year:
To be completed by the Department of Edu			he Transportation Departmo	ent office for review by
This school performed the required bus evacuation drills for the most recent semester.				
All Bus #'s Serving School Show both sub bus # and regular bus # if applicable	Date Evacuation Drill was Performed	Evacuation Drill Time	Bus Driver Signature Serving School Please have route or sub driver sign	
Principal/Designee:			Total # of Buses:	
Principal/Designee:		(signature)	Date:	

Form No.: TRN-2223-002 – Emergency School Bus Evacuation Drill School Form Revised Date: 3/26/24

(print or type)