

Special Transportation Service Driver Qualification Checklist

Name		Date of Birth			
Address		City		State/Zip	
Phone		DL #		Lic Class	
Start Date		Term Date		Over 18?	Select answer

Driver meets physical qualifications per 8840.5900 sub.15 (Y or N): Select Yes or No.

Date of First STS trip provided: _____ NETStudy 2.0 Completion Date: _____

PRE-DRIVING REQUIREMENTS

Requirement	Initial Training
Initial Pass. Assistance	
Operating Radio/ Cell Phone	
Operating Ramp/Lift	
Emergency Procedures	
Daily Vehicle Inspection	
Clean / Sanitize Vehicle	
Driving Abilities Evaluation	

TRAINING REQUIRED WITHIN 45 DAYS

Requirement 20 Hours	Date Of Completion (Certificates Are Required)
First Aid 4 Hours	
Abuse Prevention 4 Hours	
Passenger Assistance (Amb) 4 Hours	
Passenger Assistance (W/C) 4 Hours	
Defensive Driving 4 Hours	

ANNUAL RENEWAL REQUIREMENTS (Review Driving Record Checks, Sign Required Statement)

Requirement	Initial Check	Renewal	Renewal	Renewal	Renewal	Renewal	Renewal	Renewal	Renewal
Driving Record									

RENEWAL REQUIREMENTS EVERY TWO YEARS

Medical Certificate									
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RENEWAL REQUIREMENTS EVERY THREE YEARS (15 Hours Total, Certificates Are Required)

First Aid Training (4)									
Passenger Assistance (1)									
Passenger Abuse (1)									
Defensive Driving (2)									
Continuing Education (7)									

****Records are Required to be kept for a minimum of three (3) years****