

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT
TRANSPORTATION SERVICES
-TRAINING DEPARTMENT-

3101 Redding Avenue
Sacramento, California 95820
(916) 277-6704

Attention: School Bus Safety Officer

Fax #: 688-3109

VC 22454 (c) (1)
School Bus: Meeting and Passing

Today's Date: _____ Date Violation Occurred: _____

Driver Submitting Report: _____ Bus #: _____

Time of Violation: _____ A.M. or P.M. (Circle One)

Street Address Where Violation Occurred: _____

Direction of Travel (Bus): _____ Direction of Travel (Violator): _____

Did the violation occur while in the process of escorting students across the roadway (performing a red light crossover)?

Yes

Check one

No

Violator – Approximate Age of Driver: _____ Female Check one Male

Description of Vehicle Driver: _____

Vehicle License Plate #: _____ Vehicle Color: _____

Vehicle Make: _____ Vehicle Year: _____

Vehicle Model: _____ Specify if Other Than California License Plate: _____