

Special Needs Transportation (SNT) Services Quality Assurance Checklist			
Review Period: 2022-2023		Date:	
Student:		Medicaid #:	
District:		Reviewer:	
Bus Driver:			
NOTE: RECORDS SHOULD BE MAINTAINED BY YEAR AND QUARTER			
SNT LOGS - DISTRICT'S DOCUMENTATION		MET	COMMENTS/RECOMMENDATIONS
1.1	Does the student's IEP/IFSP/ITP/IPOC include special needs transportation?		
1.2	Is the student's IEP that includes special needs transportation signed and dated by the parent or guardian?		
1.3	Are copies of all SNT logs (hardcopy or electronic) available at the time of the review?		
1.4	Is the standard SCDE SNT log utilized or has SCDE approved the use of another SNT log template for the current school year?		
1.5	Does SNT logs include the following information? 1-10 below must be on all logs. 1. District name 2. District Address 3. District Phone Number 4. Date 5. Driver's name 6. State Bus Number 7. District Bus Number/Route Number 8. License Tag 9. Passenger name 10. Driver Signature		
1.6	Is documentation and error corrections made in accordance with the LEA Provider Manual guidelines for correcting legal documents (i.e., draw one line through the error, enter the correction and add signature/initials and date next to the correction)?		
SNT STAFF MONITORING		MET	COMMENTS/RECOMMENDATIONS
2.1	Is the driver certified through SCDE transportation?		
2.2	Has the bus driver(s) received SNT training specific to SNT log completion?		

	Note: Submit dated sign-in sheets for SNT log completion training provided during the 2022-2023 review year.		
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