



## SCHOOL BUS SAFETY VIOLATION NOTIFICATION

California law (*California Education Code §39843*) requires the county superintendent of schools, the superintendent of a school district, a charter school, or the owner or operator of a private school that provides transportation to or from a school or school activity to notify the Department of Motor Vehicles (DMV) within 5 calendar days of a disciplinary hearing resulting in a determination that a driver left a student unattended on a Schoolbus, School Pupil Activity Bus, or Youth Bus which amounted to gross negligence.

**IMPORTANT NOTICE:** Do not use this form to report drivers terminated for other reasons involving pupil transportation safety, but continue to use form Dismissal For Reason Involving Pupil Transportation Safety (DL 128) for such actions.

Additional copies of this form may be obtained on the DMV web site at [www.dmv.ca.gov](http://www.dmv.ca.gov).

Please mail this completed form to the following address:

Department of Motor Vehicles  
Driver Safety Services Unit, MS J234  
PO Box 942890  
Sacramento, CA 94290-0001

**Please type or print legibly the following information.**

FULL NAME OF DRIVER	DRIVER LICENSE NUMBER	DRIVER BIRTH DATE	DATE STUDENT LEFT ON BUS	DATE OF DISCIPLINARY HEARING
---------------------	-----------------------	-------------------	--------------------------	------------------------------

**Complete the checklist below (if all boxes cannot be checked, do not submit this form):**

- Driver left a student unattended aboard a Schoolbus, School Pupil Activity Bus, or Youth Bus and left the immediate vicinity of the vehicle.
- A disciplinary action was ordered and upheld in compliance with disciplinary procedures granted by law or collective bargaining agreement.
- A finding was made that the action constituted gross negligence.

**Please provide details regarding the incident that resulted in the reported disciplinary action: (Use additional sheets if necessary.)**

### EMPLOYER INFORMATION

NAME OF REPORTING EMPLOYEE	TITLE	WORK TELEPHONE NUMBER (     )
----------------------------	-------	----------------------------------

COMPANY NAME/SCHOOL DISTRICT NAME

COMPANY ADDRESS/SCHOOL DISTRICT ADDRESS

**I certify (or declare) under the penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

SIGNATURE OF REPORTING EMPLOYEE <b>X</b>	DATE
---	------