

**Acknowledgement of Hours of Service Rule**

Subject to CDE Hours of Service for School Transportation Vehicle Operators Section 301-26, 4204-R-229.00 - 229.01

No school transportation vehicle operator shall drive nor shall the school district permit or require operator to drive:

*229.01(a) In excess of 10 hours after being on-duty 14 hours following 10 hours off duty. This would include on-duty time for all employers. Ten hours off duty may be consecutive or accumulated in two or more periods of off-duty time with one period having a minimum of 6 consecutive hours of off duty.*

*229.01(b)After being on-duty for more than 70 hours in any seven consecutive days.*

**Small Vehicle Operator:**

I have read and understand the CDE's Hours of Service for School Transportation Vehicle Operators section found in 301-26.

I understand that on duty time includes all hours worked for all employers and under all assignments, i.e., my primary job, my extra duty assignment(s) and the time spent driving students to, coaching, and from events.

I understand that non-compliance with the Hours of Service rule may result in disciplinary action and, in the event of an accident, may create a significant liability issue for myself.

I agree to count my hours worked, which includes all hours worked at all jobs and the hours anticipated driving to the event, event responsibilities, and from the event, and that I will not exceed the maximum on duty allowance of 14 hours.

I understand it is my responsibility to inform the school athletic and activities director if I am not able to comply with the Hours of Service rule, so that other transportation arrangements may be made.

I understand and agree to the terms of this Agreement as noted by my signature:

\_\_\_\_\_  
Name of Employee/Driver

\_\_\_\_\_  
Driver's Signature

\_\_\_\_\_  
Date

**Athletic/Activities Director or Principal:**

I have read and understand the CDE's Hours of Service for School Transportation Vehicle Operators section provided above and to the best of my knowledge the individual named above will not exceed the 14-hour on duty maximum, which includes all hours worked for all employers and under all assignments, i.e., the individual's primary job, extra duty assignment(s) and the time spent driving students to and from events.

I also understand that I may have to make other transportation arrangements if this individual is unable to drive students.

I understand and agree to the terms of this Agreement as noted by my signature:

\_\_\_\_\_  
Name of Athletics/Activities Director or Principal

\_\_\_\_\_  
Athletics/Activities Director or Principal's Signature

\_\_\_\_\_  
Date