WHEELCHAIR SCREENING FORM

This form is designed to assist transportation (bus drivers) and/or any other school personnel (physical therapist or other school site personnel) in determining whether or not a student's wheelchair has any identifiable safety deficiencies that might make it unsuitable for transportation purposes. Please return the completed form to the transportation department or student's physical therapist upon completion so that any necessary modifications or changes in the student's equipment can be addressed.

Student Name: ______________________  School: ______________________  Screening Date: ____________

Type of Wheelchair:  □ power  □ manual  Screened By: ______________________

Reason for screening:

□ New Student

□ New Equipment

□ Safety Concerns

CHECK: √

9. Wheelchair appears neither too small nor too big for student

9. Seat and back are securely attached to wheelchair frame

9. Brakes are holding and functioning properly

9. Lap belt is auto-quality (not Velcro), attached to wheelchair frame and functioning properly

9. Headrest on wheelchair is attached and provides appropriate positioning for student's head

9. Harness/trunk support system is attached to wheelchair seat/frame

9. Trunk support system (butterfly harness/chest straps) is holding student in wheelchair

9. Footrests are in working order and securely attached to wheelchair frame

9. If a "tilt-in-space" or "reclining" wheelchair, tilting/reclining mechanism is functioning properly so that student can be transported in as upright a position as possible

9. Anti-tip bars are in place and functioning

9. Tires are inflated and wheels are functioning properly

9. Hard plastic lap tray, bookbag, medical equipment, etc. can be removed from wheelchair and securely stored out of head impact zone; if tray is made from soft foam, can be securely attached to wheelchair during transport

9. If a power wheelchair, battery is clean and secured

Comments: ____________________________________________________________

(Revised 3/30/11)