##### School Bus Driver Evaluation

# Driver Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### O = Correct X = Skills Refinement Needed

#### Pre-Trip Inspection

#### Use Form

**Turns**

Traffic Check

Signal, decelerates

Coast, lane position

**If Stop**

Necessary, gap

Stop line, full stop

Wheels straight

**Turning**

Traffic Check

Correct Lane

Signal, accelerate

**Straight Lane**

Traffic check

Proper lane

Vehicle in lane

Speed, following distance

**Lane Changes**

Traffic Check, signal

Space, smooth change

**Student Stop**

Turn signal

Yellow flashers

Park brake

Red flashers

Observation

Cross procedure

Head count

Signal, check mirrors

**Start/Stop on Roadway**

**Approach**

Traffic check

Signal on

Correct lane

Deceleration/coast

**Stop**

Parallel, not roll

Signal off, 4-way on

Parking brake on

**Resume**

Traffic check

4-way off, signal on

Parking brake off

**Railroad Crossing**

Traffic check

4-way on

Noise off

Laws, complete stop

Gear

4-ways off

Pre/Post stagin areas

**Backing**

Traffic check

**Post-Trip Inspection**

Plug in heater core

Check for students

Empty sign up

Close windows/roof

Remove safety equipment

Remove key

**Intersections**

**Stopping**

Traffic check

Deceleration, coast

Gap, stop line

Full stop

**Driving Through**

Traffic check

Yield lane, gear

Acceleration

**Curve**

Speed, lane

Traffic checks

**Bridge/Underpass**

Weight

Clearance

**Expressway**

**Merge**

Traffic check, signal

Spacing no stop

Merge, cancel signal

**Lane Change**

Traffic check, signal

Spacing, smooth

Cancel signal

**Exit**

Traffic check, signal

Smooth merge to exit

Decelerate

Cancel signal

###### ❒ Pass ❒ Re-Evaluate

It is understood that in signing this form the employee acknowledges having seen and discussed this report. The employee’s signature does not necessarily imply agreement with the conclusion of the Director of Transportation.

Driver Signature/Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Director Signature/Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_