

SCHOOL BUS DRIVER – EVALUATION INSTRUMENT

EVALUATION OF _____ Date _____

Purpose: The evaluation process is to aid the school in maintaining high quality in school transportation. Information gained during the evaluation process shall be used to enhance individual strengths and provide a plan of improvement for identified needs.

One copy of this form shall be kept on file for every evaluation period. The evaluation will be completed by April 1 of each year. When a rating of 1 or 2 is given, the reasons will be given in writing. Signing the evaluation does not necessarily mean the evaluatee is in agreement with the evaluator's statements.

4. -Commendable
 -Exceeds normal standards
 -A real strength
 -Almost always true
3. -Satisfactory
 -Acceptable
 -Meets standards
 -True most of the time
2. -Needs improvement to meet standards
 -Seldom True
1. -Unsatisfactory and fails to meet standards
 -Really needs improvement
 -Almost never true
0. -Insufficient knowledge on which to evaluate
 -Non-applicable

EVALUATION FOR SCHOOL BUS DRIVERS

- ___1. Employee helps to promote the school transportation program with words and actions.
- ___2. Employee maintains confidentiality of all work place and student issues.
- ___3. Employee has proper personal and dress appearance for the job.
- ___4. Employee follows routes and directions well.
- ___5. Employee cooperates and works well with co-workers.
- ___6. Employee is concerned about good health habits.
- ___7. Employee takes pride in the job.
- ___8. Employee cooperates with supervisor.
- ___9. Employee does a fair share of all duties of the position, cleaning, washing buses, etc.
- ___10. Employee accepts changes when necessary.
- ___11. Employee is concerned that the last child on or off is just as important as the first one.
- ___12. Employee shares ideas for improvement and shares concerns with supervisor.
- ___13. Employee is at bus shed 15 minutes prior to departure time.
- ___14. Employee reflects friendliness and warmth on the job.
- ___15. Employee follows route time schedule to the best of his/her ability.

COMMENTS:

Evaluators Signature Date

Evaluatee's Signature Date