## TRANSPORTATION APPRAISAL FORM

NAME:	POSITION	
EVALUATOR:	TITLE	
EVALUATION PERIOD:FRO	ОМ ТО	
	Rating Scale	
	<ul> <li>E Exceeds Expectation</li> <li>P Proficient</li> <li>N Needs improvement</li> <li>U Unsatisfactory</li> <li>N/A Not applicable</li> </ul>	
DIRECTONS: Use the above performance by reviewing all I	e descriptors to rate each skill. Determine the overall job ratings.	
	General Skills	
1. Works o	cooperatively with others.	
2. Particip	pates in meetings, training, and special events.	
3. Follows	s verbal and written instructions from supervisor.	
4. Follows	s district policies and procedures.	
5. Provide	es safety and security for self and others.	
6. Comple	etes assignments on time and accurately.	
7. Follows	attendance and punctuality rules.	
8. Demon	strates appropriate job knowledge.	
9. Maintai	ns neat and orderly work area.	
10. Uses	s, maintains, and stores work material properly	
11. Iden	. Identifies and responds to problems effectively	
12. Com	nmunicates effectively	
	SPECIALIZED SKILLS	
1. Ma	anages student behavior problems appropriately.	
2. Co	ompletes safety maintenance checks properly.	
3. Fo	llows bus route schedules.	
4. Ke	eps bus clean.	

PERFORMANCE GOALS:		
GENERAL COMMENTS:		
GENERAL COMMENTS:		
EMPLOYEE COMENTS:		
OVERALL PERFORMANCE RAT	ING (check one)	
•••••••••••••••••••••••••••••••••••••••		
Exceeds expectatio	ns Proficient	Needs improvement
Recommended for renewal:	Yes No	
This evaluation has been discusse I have read and received a copy of		risor.
For purposes of this document e signature.	each party's typed nan	ne shall be deemed as an original
Employee Signature	Date	

My signature indicates this report has been discussed with me. I also understand my signature does not necessarily indicate agreement, and that I have 10 working days to prepare a written response that will be attached to this evaluation. I am aware this evaluation review will be placed in my personnel file.