STANDARDS FOR QUALITY PROFESSIONAL PRACTICE

Name: Position:					Loca	tior	າ:				
Evaluation Period From To:		Probationary An					An	nual			
		Problem Area			Approaches Standard			Meets Standard			
W	ORK HABITS								[
• • • • •	Consistently follows assigned schedule; Consistently performs duties with minimal supervision; Consistently maintains the cleanliness of the bus; Completes tasks in a timely manner; Accepts new or different conditions; adjusts quickly; cooperative; flexible; Consistently keeps work organized; carries out duties effectively and efficiently; Follows district and department procedures and policies; Follows pre-trip inspection procedures inside/outside the bus; Demonstrates defensive driving techniques; Adheres to all lines, markings and road signs; Follows proper student loading and unloading procedures;	Comme	nts/Goa	IIS:							
0	MMUNICATION/TEAMWORK									_	
•	Communicates with colleagues, follows instructions and uses appropriate problem solving and other skills that enhance the transportation team; Follows proper radio protocol; Positively communicates with colleagues; Uses effective communication skills with staff and students; Appropriately communicates with/responds to parents; Responds to e-mails in a timely manner; Follows written and verbal directions; Supports district goals and the instructional program;	Comme	<u> </u>	Is:				1	<u> </u>		
AT	TENDANCE/PUNCTUALITY								[
•	Regular attendance supports consistency in the work environment; Timely notice is given when absence is anticipated and proper procedures are followed; Arrives prepared to work at designated start time; Works full shift; leaves at designated end time;	Commer	nts/Goa	ls:							

Problem Area	Approaches Standard	Meets/Exceeds Standard
Comments/Goals:		
Comments/Goals:		
	Comments/Goals:	Problem Area Standard Comments/Goals:

Other Comments:

NOTE: Additional information may be attached.

Any added information must be dated and signed by both the evaluator and the employee.

The signature below does not necessarily imply that the employee agrees with the preceding report; only that she/he has seen and discussed it with the evaluator and has been provided a copy. Employee may attach a statement.

Employee Signature:	Date:
Evaluator Signature:	Date:
Employee Statement attached: 🗌 Yes 🗌 N	10