

**DRIVER EVALUATION REPORT**

Student Name: School: Balance Due: \_

Phone number: Birth date: Permit number: \_

 Permit expires: \_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Skill/drive# | Drive 1 | Drive 2 | Drive 3 | Drive 4 | Drive 5 | Drive 6 |
| Instructor |  |  |  |  |  |  |
| Drive Date |  |  |  |  |  |  |
| Prestart |  |  |  |  |  |  |
| Move/Stop |  |  |  |  |  |  |
| Turns |  |  |  |  |  |  |
| Tracking |  |  |  |  |  |  |
| Backing |  |  |  |  |  |  |
| Parking |  |  |  |  |  |  |
| Intersection |  |  |  |  |  |  |
| Lane Change |  |  |  |  |  |  |
| Speed |  |  |  |  |  |  |
| Space |  |  |  |  |  |  |
| Visual |  |  |  |  |  |  |
| Ramps |  |  |  |  |  |  |
| School Zone |  |  |  |  |  |  |
| Drive Notes |  |  |  |  |  |  |

**Scoring Guidelines:**

1. **At risk = Unsafe 2-Novice = With help 3-Independent = Self Correcting 4-Defensive= Safe**