



Appendix D

EVALUATOR CERTIFICATION

The driver identified below has met the experience and training competencies listed in MS 171.321, Subd.4 and Subd. 5.

District/Carrier: _____

Evaluator: _____

Driver: _____ **Date:** _____

Met requirements:

Behind the wheel evaluation (Appendix A) **Date:** _____

Pre-trip evaluation (Appendix B) **Date:** _____

Yes	No	The driver exhibits the following competencies: Safely operates the type of school bus the driver will be driving; Understands student behavior, including issues relating to students with disabilities; Encourages orderly conduct of students on the bus and handles incidents of misconduct appropriately; Knows and understands relevant laws, rules of the road, and local school bus safety polices; Handles emergency operations; Safely loads and unloads students.
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Yes	No	Checked files for indications of any student management problems Contact school staff to ask if there are any student management concerns School Transportation Policy per Minn. Stat. 123B.91 reviewed with driver
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Comments from ride-along observation: (Include student management issues or concerns.)

Evaluator signature: _____ Driver signature: _____

This is the only form approved by the Minnesota State Patrol