

Student Daily Driver Evaluation Report

Minnesota North College CDL Program

Name: _____

Date: _____

Permit Expiration Date: _____

Med Card Expiration Date: _____

Instructor: _____

Truck Number: _____

Trailer Number: _____

Total Miles: _____

Total Hours: _____

Evaluation of Progress

Codes:

C = Competent

CWS = Competent With Supervision

NC = Not Yet Competent

X = Not Yet Covered

General Driving Ability: _____

In-Cab Inspection: _____

Proper Use of Mirrors: _____

Walk Around Inspection: _____

Proper Speed Control: _____

Coupling: _____

Attention to Traffic Signs: _____

Uncoupling: _____

Highway Driving: _____

Down Shifting: _____

Proper Following Distance: _____

Square Turn: _____

Proper Lane Control: _____

Button Hook Turn: _____

Proper Passing: _____

Backing: _____

Right Turns: _____

Railroad Crossing: _____

Left Turns: _____

Log Current to Last Duty Status: _____

City Driving: _____

Attitude and Behavior: _____

Additional Comments
