

MOTOR OFFICER FIELD TRAINING D.O.R.

DATE _____ **WEEK #** _____

NAME _____

BRAKING RATING # _____

CLUTCH/THROTTLE CONTROL RATING # _____

CURVE NEGOTIATION RATING # _____

HAZARD RECOGNITION RATING # _____

HEAD AND EYES RATING # _____

LANE PLACEMENT RATING # _____

POSTURE RATING # _____

SMOOTHNESS RATING # _____

SURFACE APPRAISAL RATING # _____

TRAFFIC STOPS RATING # _____

RATING KEY: (1) UNSATISFACTORY (2) WEAK (3) IMPROVEMENT NEEDED (4) QUALIFIED (5) ABOVE AVERAGE

COMMENTS: _____

MOTOR OFFICER SIGNATURE: _____

F.T.O.: _____

SUPERVISOR: _____