

Driver Performance Evaluation Report

Date: [Insert Date]

Driver Name: [Insert Driver Name]

Employee ID: [Insert Employee ID]

Department: [Insert Department]

Performance Summary

The following evaluation is based on the driver's performance over the past [Insert Time Period].

Criteria Evaluated

- Safe Driving Practices: [Rating]
- Punctuality: [Rating]
- Vehicle Maintenance: [Rating]
- Customer Feedback: [Rating]
- Compliance with Regulations: [Rating]

Strengths

[Insert strengths and positive feedback]

Areas for Improvement

[Insert areas for improvement]

Overall Evaluation

[Overall assessment of driver performance]

Supervisor Comments

[Insert supervisor comments]

Recommendations

[Insert recommendations for training or further development]

Evaluator Name: [Insert Evaluator Name]

Title: [Insert Title]

Signature: _____