

Safe Driving Performance Assessment

Date: [Insert Date]

Employee Name: [Insert Employee Name]

Employee ID: [Insert Employee ID]

Department: [Insert Department]

Dear [Employee Name],

We are writing to provide you with a performance assessment regarding your safe driving practices over the past [insert time frame]. Our objective is to ensure a safe and efficient driving environment for all employees.

Assessment Summary

- Number of trips: [Insert Number]
- Accidents reported: [Insert Number]
- Traffic violations: [Insert Number]
- Safe driving score: [Insert Score]

Your dedication to adhering to safe driving practices is commendable. [Insert specific positive feedback].

However, we have noted some areas for improvement, including [Insert areas for improvement].

Recommendations

- [Insert Recommendation 1]
- [Insert Recommendation 2]
- [Insert Recommendation 3]

We encourage you to continue focusing on safety while driving and to reach out if you need additional resources or support.

Sincerely,

[Your Name]

[Your Position]

[Your Company]