



# Bus Driver Training & Competency Checklist Template

 Show only Checklist

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Default 

## Pre-Shift Vehicle Inspection & Safety Briefing

Ensures driver understands vehicle condition and safety procedures before commencing duty.

### Inspection Date

Enter date...

### Inspection Time

Enter time...



### Vehicle Mileage/Kilometers

Enter a number...

### Vehicle Condition (Pre-Shift)

- Excellent
- Good
- Fair
- Poor

### Fluid Levels Checked?

- Engine Oil
- Coolant
- Brake Fluid
- Power Steering Fluid
- Windshield Washer Fluid

### Any Pre-existing Issues Noted?

Write something...

### Safety Briefing Received?

- Yes
- No

### Driver Signature

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# Defensive Driving Techniques

Assessment of driver's skills in hazard perception, anticipation, and safe reaction times.

## Following Distance (Seconds)

## Hazard Perception Test Score (High/Medium/Low)

 High Medium Low

## Speeding Incidents (Last 12 Months)

## Braking Response Time (Satisfactory/Needs Improvement)

 Satisfactory Needs Improvement

## Near Miss Incidents Reported (Last 12 Months)

## Observations/Feedback from Driving Instructor

# Passenger Safety & Customer Service

Evaluation of driver's ability to manage passengers, handle conflicts, and provide a positive customer experience.

## Number of Passenger Complaints Received (Shift)

## Conflict Resolution Technique Used (if applicable)

- Verbal De-escalation
- Assistance from Authority
- Other (Specify)

## Description of Any Passenger Interactions Requiring Intervention

### Assisted Passengers With (Check all that apply)

- Boarding Assistance
- Luggage Assistance
- Navigation Assistance
- Medical Assistance
- Other (Specify)

### Passenger Behavior Observed (Select Best Description)

- Respectful & Cooperative
- Slightly Disruptive
- Disruptive
- Aggressive

### Notes on Customer Service Performance

Write something...

## Route Knowledge & Traffic Law Compliance

Verification of driver's familiarity with assigned routes and adherence to traffic regulations.

### Number of Assigned Routes

Enter a number...

### **Familiarity with Route Detours (if any)**

- Excellent
- Good
- Fair
- Needs Improvement

### **Last Route Review Date**

Enter date...

### **Knowledge of Traffic Law Updates**

- Up-to-date
- Mostly Updated
- Requires Review
- Not Aware

### **Notes on Route-Specific Hazards**

Write something...

### Number of traffic violations in last 12 months

Enter a number...

### Understanding of Bus Stop Regulations

- Complete
- Adequate
- Needs Review

## Emergency Procedures & Incident Reporting

Assessment of driver's understanding of emergency protocols and incident reporting procedures.

### Brief Description of Incident (if applicable)

Write something...

### Type of Emergency/Incident

- Medical Emergency
- Mechanical Failure
- Traffic Accident
- Security Threat
- Passenger Disturbance
- Other (Specify)

### Number of Passengers Involved (if applicable)

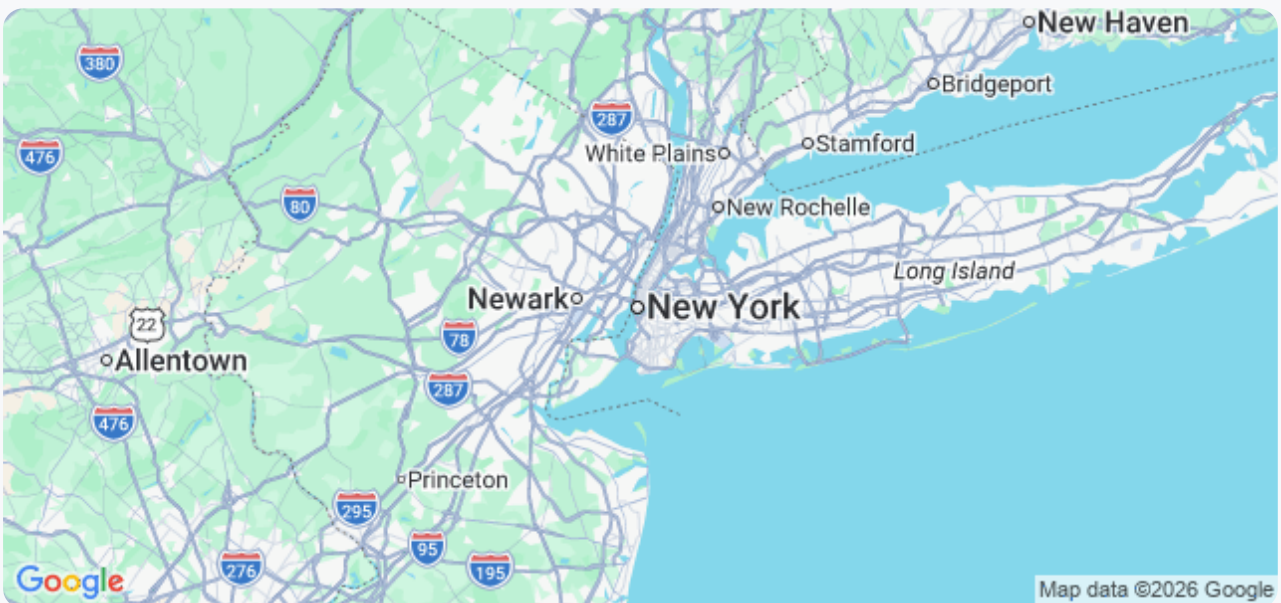
Enter a number...

### Detailed Account of Events Leading to Incident

Write something...

### Exact Location of Incident (GPS coordinates preferred)

 [Set My Current Location](#)



### Date of Incident

Enter date...

### Time of Incident

### Were emergency services contacted?

- Police
- Fire Department
- Ambulance
- No Emergency Services Contacted

### Attach Photos/Videos (if available)

[Upload File](#)

## Fare Collection & Revenue Handling

Evaluation of driver's proficiency in fare collection, ticket validation, and revenue accountability (if applicable).

### Starting Cash Float Amount

### Total Fare Revenue Collected

### Number of Tickets/Fares Sold

Enter a number...

### Revenue from Concessions/Discounts

Enter a number...

### Fare Payment Methods Accepted

- Cash
- Card
- Mobile Payment
- Other

### Time of Fare Collection Reconciliation

Enter time...

### Any Discrepancies or Issues Encountered

Write something...

### Driver Signature (Revenue Reconciliation)

## Onboard Systems & Equipment Operation

Confirmation that the driver is proficient in using onboard systems like communication devices, GPS, and passenger information displays.

### Communication Device Functionality Check

- Working
- Not Working
- Partially Working

### GPS Navigation System Status

- Functional
- Offline
- Malfunctioning

### Passenger Information Display Brightness Level

### Last Software Update Date (GPS/Display)

### Automated Passenger Counter (APC) Status

- Operational
- Offline
- Inaccurate

### Time of Last System Reboot

# Accessibility & Inclusive Service

Verification of driver's ability to assist passengers with disabilities and provide inclusive service.

## Assistance Provided to Passengers with Mobility Aids?

- Yes - Routine
- Yes - Occasionally
- No
- Not Applicable

## Describe any specific assistance provided to passengers with visual impairments.

Write something...

## Communication Strategies with Non-English Speaking Passengers?

- Utilized Translation Apps
- Used Simple Gestures
- Relied on Passenger Assistance
- None Required

### Number of Passengers with Disabilities Assisted Today

Enter a number...

### Details of any challenging accessibility situations encountered and how they were addressed.

Write something...

### Awareness of Quiet Zones for Passengers with Sensory Sensitivities?

- Yes - Explained to Passenger
- Yes - Pointed Out Location
- No
- Not Applicable

### Date of Last Accessibility Refresher Training

Enter date...

## Continuous Professional Development (CPD)

Records of completed training and identifies areas for ongoing improvement.

### Last Refresher Training Date

Enter date...

### Type of CPD Completed

- Online Course
- Workshop
- Conference
- Mentorship
- Simulator Training

### Brief Description of CPD Activity

Write something...

### Hours of CPD Completed

Enter a number...

### Proof of Completion (Certificate/Record)

 Upload File

### Area of Focus

- Defensive Driving
- Passenger Safety
- Route Knowledge
- Emergency Procedures
- Vehicle Maintenance

### Next Scheduled CPD Date

Enter date...

## Post-Training Evaluation & Feedback

Gather feedback from the driver and training instructors to refine training programs.

### Overall Training Satisfaction (1-10)

Enter a number...

### What aspects of the training were most helpful?

Write something...

### What aspects of the training could be improved?

Write something...

### Did the training adequately cover emergency procedures?

- Yes
- No
- Somewhat

### Date of Training Completion

Enter date...

### Time of Evaluation Completion

Enter time...

### Which topics require further reinforcement?

- Defensive Driving
- Passenger Safety
- Route Knowledge
- Emergency Procedures
- Fare Collection

### Trainer/Instructor Feedback

Write something...

