COASTAL EMPIRE pca — Dedicated to the Enjoyment of the Marque

EVALUATE YOUR STUDENT

Student Name: _____ Event Date: _____/_____
Month/year

Please rate your student in the following areas relative to his/her run group. Use (1) for "needs work" and 5 for 'ready to move up", please circle the appropriate number. The student should be rate (5) on almost everything if you recommend a move to the next level.

	Day One	Day Two
Knowledge of the line	**1 2 3 4 5**	**1 2 3 4 5**
Application of Controls	**1 2 3 4 5**	**1 2 3 4 5**
Brakes	**1 2 3 4 5**	**1 2 3 4 5**
Steering	**1 2 3 4 5**	**1 2 3 4 5**
Accelerator		
Knowledge of Flags/Stations	**1 2 3 4 5**	**1 2 3 4 5**
Judgement	**1 2 3 4 5**	**1 2 3 4 5**
Attitude	**1 2 3 4 5**	**1 2 3 4 5**
Courtesy	**1 2 3 4 5**	**1 2 3 4 5**

Instructor remarks and comments: _____
_____
_____
_____
_____
_____

Is the student ready for the next run level? Yes / No
Is the student ready for a solo check ride? Yes / No

_____ _____
PCA Instuctor Name **Signature**

Coastal Empire Region Driver Education Series – Thank you for your Participation!

Chief Instuctor Use Only **Solo Check Ride** **Date _____**
Check Ride
Scheduled_____ **Instructor Signature/Name_____**
Completed_____ **Chief instructor Signature/Name_____**