

OVCA FORM 141: TRANSPORT SERVICE EVALUATION

In-House Out-Sourced

Date: _____
Requesting: _____
Department: _____
Driver's Name: _____
Vehicle Plate No.: _____

NOTE: Upon entering the vehicle, the driver must immediately give the evaluation form to the passenger.

Instruction: Please check the box that best fits your experience when availing transport service.

Legend: 4 – Always
 3 – Often
 2 – Rarely
 1 - Never

A. Driver	4	3	2	1
1. Obeys/Observes traffic signalization system.				
2. Obeys/Observes traffic and road signage.				
3. Avoids road altercation.				
4. Avoids using phone while driving.				
5. Drives in a safe manner.				
6. Avoids any traffic violation.				
7. Observes proper grooming/hygiene and wears appropriate attire for work.				
8. Reports early.				
9. Stays according to duty hours.				
10. Adapts route changes as directed.				
11. Communicates positively to students/faculty/NTP.				
12. Follows the passenger capacity required for the vehicle.				
B. Vehicle				
1. The service vehicle is clean.				
2. The air-conditioning unit is properly working.				
3. The seatbelts are functioning.				
4. First aid kit is available.				
5. Fire extinguisher is available.				
6. All seats are functioning.				

Comment:

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