



Instructor Name:	Instructor Permit #:
School name:	Date (mm/dd/yy):

## Class 1 Mandatory Entry Level Training Practical Assessment: CONTROL SKILLS

MARKING LEGEND:	
<span style="color: green;">●</span>	Satisfactory
<span style="color: yellow;">●</span>	Needs improvement
<span style="color: red;">●</span>	Unsatisfactory

Student Name:	Student Driver Licence #:

<b>Straightline:</b>	<span style="color: green;">●</span>	<span style="color: yellow;">●</span>	<span style="color: red;">●</span>	<b>Comments:</b>
Position				
Speed and Control				
Signal				
Awareness				
Time				
<b>Offset Backing:</b>	<span style="color: green;">●</span>	<span style="color: yellow;">●</span>	<span style="color: red;">●</span>	<b>Comments:</b>
Position				
Speed and Control				
Signal				
Awareness				
Time				
<b>90° Alley Dock:</b>	<span style="color: green;">●</span>	<span style="color: yellow;">●</span>	<span style="color: red;">●</span>	<b>Comments:</b>
Position				
Speed and Control				
Signal				
Awareness				
Time				
<b>Additional comments:</b>				