



# Motorcycle Skills Student Evaluation

STUDENT NAME				STUDENT NUMBER				COURSE NUMBER			
CONTACT NUMBER		LICENCE CLASS <input type="checkbox"/> CLASS 6 <input type="checkbox"/> CLASS 8			TYPE OF TRAINING <input type="checkbox"/> GROUP <input type="checkbox"/> PRIVATE			MOTORCYCLE			
<b>Scoring</b>		<b>Practical Sessions</b>						<b>Classroom Sessions</b>			
1 – In progress - practice and coaching recommended		Date	Start	End	Instr.	Date	Start	End	Instr.		
2 – Displays competency in this area											
<b>Skills</b>		1	2	3	4	5	6	<b>Comments and Date</b>			
<b>Pre-ride Check (check ✓)</b>	LDL/DL										
	Gear										
	Readiness										
	Motorcycle										
<b>Non-Powered</b>	Pushing										
	Parking										
	Mount/Dismount										
	Engine Start										
<b>Body Posture</b>	Head and Eye										
	Low Speed										
	High Speed										
<b>Visual Skills</b>	360 Check										
	Direction of Travel										
	Blind Spots										
<b>Space Margins</b>	Mirrors										
	Follow Distance										
	Objects										
<b>Speed Control</b>	Others										
	Clutch/Throttle										
	Braking - Low Speed										
	Braking – High Sp.										
	Throttle Control										
	Gearshift - Up										
<b>Steering Control</b>	Gearshift - Down										
	Low Speed										
	Medium Speed										
<b>Communication</b>	High Speed										
	Signals										
	Hand Signals										
	Horn										
<b>Collision Avoidance</b>	Timing										
	Swerve Left/Right										
	Stop										
	Stop and Go										
<b>Optional</b>	Stop in Curve										
	Obstacle										
	Hill Start										
<b>Skills Self-Assessment</b>								<b>Midpoint Review</b>		<b>Final Review</b>	
<b>MSA / MST Date / Result</b>	Loose Surface							STUDENT INITIALS		STUDENT INITIALS	
	1 <sup>st</sup>	P / F					INSTRUCTOR INITIALS		INSTRUCTOR INITIALS		
	2 <sup>nd</sup>	P / F									
3 <sup>rd</sup>	P / F										

## HOW TO USE THE MOTORCYCLE SKILLS STUDENT EVALUATION FORM

The following are guidelines for using the ICBC Motorcycle Skills Student Evaluation form. The form is designed for use in closed-circuit motorcycle training. Schools may use or change the form to suit their needs, or develop their own form.

### Student and course information section

- Student name – first and last name in any order
- Student number – any appropriate tracking number (could be driver licence number)
- Course number – school course number
- Contact number – student cell phone number or other appropriate contact information
- Licence class – check whether Class 6 or 8
- Type of training – check whether group or private training
- Motorcycle – motorcycle type, model, or ID number

### Practical and classroom sessions

For each session, list the date, start and end time, and the instructor. Use as many lines as needed for your course.

### Comments / Date

This space is for the instructor to make note of (and date) any key and relevant information about the student, his or her challenges, issues, and so on. Good notes can help inform other instructors who may work with the student and may help to protect the instructor and school in the event of a liability issue should the student crash.

### Skills and columns 1 – 6

- Skills are organized into global skill categories.
- Rate the student's ability at least twice during the course (mid-point and final) using the 1-2 scoring or other rating scale.
- If a skill or exercise is not covered in that session, leave it blank.
- Columns could be used to represent days, sessions (i.e., half days), individual lessons, or blocks of lessons. Decide how you want to use the columns and ensure that all instructors in the school are filling the form out consistently.

### Midpoint / Final Review

After reviewing the student progress with them at the midpoint and toward the end of the course, have the student initial that they understand their skill level.

### MSA/MST Date / Result

Record the date and result of the assessment.