# **Work Process Schedule**

|  |  |
| --- | --- |
| Transit Coach Operator | |
| **Job Description:** Provide safe, reliable, and courteous transportation for goods and passengers. These operators drive buses or motor coaches, including regular route operations, charters, and private carriage. | |
| **RAPIDS Code:** 2074CB | **O\*NET Code:** 53-2021.00 |
| **Estimated Program Length:** 1 year | |
| **Apprenticeship Type:**  Competency-Based  Time-Based  Hybrid | |

Suggested On-the-Job Learning Outline

|  |  |  |
| --- | --- | --- |
| Adheres to policies, laws and regulations related to operating a motor coach | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Adheres to policies, laws and regulations related to operating a motor coach |  |  |
| 1. Adheres to customer service policies |  |  |
| 1. Follows agency personnel policies and practices |  |  |
| 1. Fulfills agency training and assessment requirements |  |  |
| 1. Maintains a safe and secure environment for self and passengers |  |  |

|  |  |  |
| --- | --- | --- |
| Follows standard operating procedures issued by employer | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Completes a pre-trip inspection of critical components and completes Driver Vehicle Inspection Report |  |  |
| 1. Performs a post-trip inspection check |  |  |
| 1. Performs a proper terminal check |  |  |

|  |  |  |
| --- | --- | --- |
| Properly and safely operates transit vehicle during the day and night in a variety of weather situations and road conditions | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Operates vehicle safely in the day or night |  |  |
| 1. Scans, detects, and responds properly to potential dangers in the driving environment |  |  |
| 1. Performs proper parking/securement procedures |  |  |
| 1. Properly performs routine procedures such as fare collection, relief procedures, and end of route procedures |  |  |
| 1. Safely performs service stops |  |  |
| 1. Safely enters and exits intersections and roundabouts |  |  |
| 1. Safely shares road with bicyclists, pedestrians, and motorists; accident avoidance |  |  |
| 1. Consistently uses proper signals to communicate to other drivers |  |  |
| 1. Manages life as an operator to minimize stress and maintain health |  |  |

|  |  |  |
| --- | --- | --- |
| Provides customer service to passengers; ensures safe transportation of passengers | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Adheres to Americans with Disabilities Act requirements |  |  |
| 1. Assists customers with special needs |  |  |
| 1. Reports malfunctions, breakdowns or maintenance needs accurately and promptly |  |  |
| 1. Safely and effectively diffuses escalating situations |  |  |
| 1. Displays knowledge of the routes to assist passengers with navigation |  |  |

|  |  |  |
| --- | --- | --- |
| Utilizes appropriate vehicle communication devices and techniques; communicates professionally with others to gain or convey information | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Properly uses signals to communicate with drivers |  |  |
| 1. Communicates appropriately with dispatch operators and/or supervisors |  |  |
| 1. Reports malfunctions, breakdowns or maintenance needs accurately and promptly |  |  |
| 1. Displays knowledge of the routes to assist passengers with navigation |  |  |

|  |  |  |
| --- | --- | --- |
| Operates according to health, safety and environmental standards, best practices and requirements | | |
| **Competencies** | **Date Completed** | **Initial** |
| 1. Complies with hours of service requirements |  |  |
| 1. Operates in a way that minimizes negative impact of transportation on environmental health and safety |  |  |
| 1. Responds appropriately and completes proper documentation in the event of an accident |  |  |

Suggested Related Instruction Outline

|  |  |
| --- | --- |
| Provider | |
| **Name:** | |
| **Address:** | |
| **Email:** | **Phone Number:** |
| **Suggested Related Instruction Hours:** 144 | |

|  |  |  |
| --- | --- | --- |
| **Course Number** | **Course Title** | **Contact Hours** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |