



SUPERIOR BAY MARINE OF ALABAMA



WHEELHOUSE PERSONNEL TRAINING & EVALUATION PACKET

Performance Evaluation & Role Qualification Recommendation

1 EMPLOYEE INFORMATION

Employee Name: _____

Evaluation Date: _____

Vessel/Towboat: _____

Review Period: _____

2 PERFORMANCE EVALUATION

1 = Unsatisfactory 2 = Needs Improvement 3 = Meets Expectations
4 = Above Expectations 5 = Excellent

EVALUATION FACTOR	1	2	3	4	5	COMMENTS
Leadership / Command Presence	☐	☐	☐	☐	☐	
Safety Judgment	☐	☐	☐	☐	☐	
Regulatory / TSMS Compliance	☐	☐	☐	☐	☐	
Rules of the Road	☐	☐	☐	☐	☐	
Navigation Assessment / Voyage Planning	☐	☐	☐	☐	☐	
Vessel Handling	☐	☐	☐	☐	☐	
Tow Handling	☐	☐	☐	☐	☐	
Radar / Electronic Navigation	☐	☐	☐	☐	☐	
Situational Awareness / Lookout	☐	☐	☐	☐	☐	
Pilothouse Resource Management	☐	☐	☐	☐	☐	
Communications	☐	☐	☐	☐	☐	
Emergency Response	☐	☐	☐	☐	☐	
Documentation / Logkeeping	☐	☐	☐	☐	☐	
Crew Supervision / Training	☐	☐	☐	☐	☐	
Fatigue Management / Conduct	☐	☐	☐	☐	☐	
Overall Readiness	☐	☐	☐	☐	☐	

3 ROLE QUALIFICATION RECOMMENDATION

☐ Qualified - Captain

☐ Qualified - Relief Captain

☐ Qualified - Pilot

☐ Continue Under Observation / Training

☐ Additional Vessel / Route Training Required

☐ Not Qualified at This Time

4 RESTRICTIONS / COACHING NOTES

5 SIGNATURES

Evaluator Signature / Date

Port Captain / Manager Signature / Date

Employee Signature / Date

