

OJS QUESTIONNAIRE TEAMSTERS LOCAL 71



Document your OJS or one-day ride so you have the records you need if the company tries to harass or discipline you for production.

Load Quality

- | | Yes | No |
|------------------------------------------------------------|--------------------------|--------------------------|
| Were any supervisors in your truck before your start time? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have your regular pre-loader? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was your load manicured? | <input type="checkbox"/> | <input type="checkbox"/> |

AM Routine

- | | Yes | No |
|----------------------------------------------------------|--------------------------|--------------------------|
| Did you verify your air? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you pre-trip the vehicle? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was anything done to expedite AM procedure? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were cars moved next to you or in front of you? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was traffic guided for your or other vehicles? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was your vehicle moved to an easier position to get out? | <input type="checkbox"/> | <input type="checkbox"/> |

Normal Work & Delivery Area

- | | Yes | No |
|-----------------------------------------------------------------|--------------------------|--------------------------|
| Did you have your NDA's? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have any commercial work missing, or added? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were any schools or regular drop stops missing? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was volume lighter for schools due to vacation or summer break? | <input type="checkbox"/> | <input type="checkbox"/> |
| Was delivery area more condensed? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were any of your P/U's removed or swept? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you have OCA's? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were any OCA's diverted to another driver? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you do pick-ups on schedule? | <input type="checkbox"/> | <input type="checkbox"/> |

Routine & Breaks

- | | Yes | No |
|--------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| Were you able to take normal bathroom breaks without issue or being told to code off as a break? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you able to go to the store for water without coding it as a break? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you allowed a full hour for meal? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did supervisor instruct you when to take lunch? | <input type="checkbox"/> | <input type="checkbox"/> |

Misloads & Off-Routes

- | | Yes | No |
|--------------------------------------------------|--------------------------|--------------------------|
| Did you have off-routes? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did supervisor call someone to pick them up? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you allowed to deliver your off-routes? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were any misloads/off-routes dropped off to you? | <input type="checkbox"/> | <input type="checkbox"/> |

Supervisor's Instructions

- | | Yes | No |
|-------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| Did you receive any instructions that violated any state or federal laws? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did supervisor tell you to do anything that violates UPS policies, procedures or DIAD training? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you given unsafe instructions? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you asked to help with over 70lb packages? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you instructed to use CIR without making customer contact? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you told to overload the hand truck? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you not allowed to use a hand truck when needed? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you told to walk on lawns or other non-walkways? | <input type="checkbox"/> | <input type="checkbox"/> |

C.O.D. & Driver Release

- | | Yes | No |
|---------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| With a C.O.D., did supervisor tell you to leave the package and return later for the check? | <input type="checkbox"/> | <input type="checkbox"/> |
| Were you allowed to follow proper driver-release methods? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you use release bags when necessary? | <input type="checkbox"/> | <input type="checkbox"/> |
| Did you leave an info notice when releasing out of sight? | <input type="checkbox"/> | <input type="checkbox"/> |

continued on reverse

Supervisor Interference

	Yes	No
Did the supervisor hold traffic when you crossed streets?	<input type="checkbox"/>	<input type="checkbox"/>
Did the supervisor hold doors for you?	<input type="checkbox"/>	<input type="checkbox"/>
Did they push elevator buttons?	<input type="checkbox"/>	<input type="checkbox"/>
Did they open or close the cab door?	<input type="checkbox"/>	<input type="checkbox"/>
Did they open or close gates to houses?	<input type="checkbox"/>	<input type="checkbox"/>
Did they allow you to work as you normally do?	<input type="checkbox"/>	<input type="checkbox"/>
Were you allowed to follow Orion?	<input type="checkbox"/>	<input type="checkbox"/>
Were you allowed to use elevators?	<input type="checkbox"/>	<input type="checkbox"/>
Did they point out packages in the cargo area?	<input type="checkbox"/>	<input type="checkbox"/>
Did they tell you the next stop?	<input type="checkbox"/>	<input type="checkbox"/>
Did they tell you how many pieces there were for a stop?	<input type="checkbox"/>	<input type="checkbox"/>
Did they tell you what route to take to deliveries?	<input type="checkbox"/>	<input type="checkbox"/>
Did they tell you the shelf number or location of packages?	<input type="checkbox"/>	<input type="checkbox"/>
Did supervisor carry packages or assist you in any way when making deliveries?	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
Did supervisor walk ahead of you at stops?	<input type="checkbox"/>	<input type="checkbox"/>
At any time did supervisor remain in vehicle while you made deliveries?	<input type="checkbox"/>	<input type="checkbox"/>
Did they greet customers at deliveries?	<input type="checkbox"/>	<input type="checkbox"/>
Did supervisor walk behind you or kick your heels as you were walking?	<input type="checkbox"/>	<input type="checkbox"/>

PM Routine

Did you fuel up?	<input type="checkbox"/>	<input type="checkbox"/>
Did you do post trip?	<input type="checkbox"/>	<input type="checkbox"/>
Did you follow normal PM routine?	<input type="checkbox"/>	<input type="checkbox"/>

General

During the OJS, at any time, did you feel intimidated, harassed or coerced?	<input type="checkbox"/>	<input type="checkbox"/>
Did supervisor act professionally?	<input type="checkbox"/>	<input type="checkbox"/>
Were you rushed?	<input type="checkbox"/>	<input type="checkbox"/>
Were you overly supervised?	<input type="checkbox"/>	<input type="checkbox"/>
Was the ride fair?	<input type="checkbox"/>	<input type="checkbox"/>

Notes:

TEAMSTERS LOCAL 71

www.TeamstersLocal71.org (704) 596-2475 2529 Beltway Blvd, Charlotte NC