

Vehicle & Equipment Operator

Evaluation

Operator's name: _____ Dept. /Station: _____

Type of vehicle/equipment: _____ Date: _____

_____ Understands and follows general safety rules & specific controls for this vehicle/equipment.

_____ Can perform a pre-operation check of the vehicle/equipment and familiar with the owner's manual.

_____ Cautious and aware of surrounding activity.

_____ Overall, observed to be a competent operator.

Comments:

Evaluated by: _____ Title: _____

Date: _____