

Reclamation Manual

Directives and Standards

7-2533 (5-99)
Bureau of Reclamation

DAM OPERATOR PROFICIENCY REVIEW

Name of Dam Operating Personnel: _____		Name of Dam(s): _____	
Region/Project Name: _____			
Operating Entity/Office: _____			
Classroom Training:		Month/Year	Location
Last dates attended		_____	_____
		_____	_____
Onsite Training:			
Instructor(s) Name(s) _____		Code _____	Code _____
		_____	_____
Knowledge of and/or proficiency in the use of: (check as completed)			
SOP and other operating and reference documents			<input type="checkbox"/>
Reservoir operating procedures			<input type="checkbox"/>
EPP/EAP and emergency management responsibilities			<input type="checkbox"/>
Operations related to major control gates/valves and other mechanical equipment			<input type="checkbox"/>
Instrumentation purposes, locations, readings, maintenance, etc.			<input type="checkbox"/>
Operating log			<input type="checkbox"/>
Performance parameters (if applicable), modes of failure, visual observation			<input type="checkbox"/>
Maintenance management system and related document needs			<input type="checkbox"/>
Personnel safety procedures			<input type="checkbox"/>
Communications, attendance, and access factors related to operations			<input type="checkbox"/>
Other specific duties and responsibilities related to the dam:	_____		<input type="checkbox"/>
	_____		<input type="checkbox"/>
Needed improvements:			

Acknowledged by: _____		Date _____	
(Signed by dam operator/alternate)			
Validated by: _____		Date _____	
(Signed by principal onsite instructor)			