



Operator/Authorization Test - (Knowledge & Skills)

FWS Form 3-2392
08/09

Student Name: _____ **Date:** _____
Employee Type: _____ **Duty Station:** _____
Address: _____

A. Equipment Category: Check appropriate category(s)

- | | | | |
|--|---|--|--------------|
| <input type="checkbox"/> Agricultural Tractors | <input type="checkbox"/> Excavator | <input type="checkbox"/> Forklift | Class: _____ |
| <input type="checkbox"/> Four Wheel Drive Loader | <input type="checkbox"/> Crawler Loader | <input type="checkbox"/> Off Road Utility Vehicle | Type: _____ |
| <input type="checkbox"/> Crawler Dozer | <input type="checkbox"/> Skid Steer | <input type="checkbox"/> Specialty Tracked Equipment | Type: _____ |
| <input type="checkbox"/> Backhoe/Loader | <input type="checkbox"/> Motor Grader | <input type="checkbox"/> Scraper Pan | |

B. Equipment Description: (type, make, model) _____

C. Training: (enter Completed as student successfully accomplishes task)

1. Pre - Class study: _____
2. Four hours of class instruction: _____
3. One hour of actual "seat time": _____
4. Other (explain): _____

D. Authorization to Operate Check List: Authorization to operate by reason of demonstration of knowledge and proficiency with each type of equipment. Check each procedure below as they are completed on a pass/fail basis.

- | | | |
|-------------------------------|-------------------------------|--|
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | a. The proper methods of fueling, adding oil and water, servicing the battery, and lubrication. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | b. The pre-start procedures, to include proper safety checks. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | c. The proper starting and warm-up of the engine. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | d. The proper operational procedures, shall include use of all controls and demonstration of travel maneuvers necessary for the types of terrain that will be encountered. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | e. The proper hookup and operation of machinery and attachments that are used on the equipment. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | f. The proper shut-down procedures. |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | g. Proper load securement and tie-down of equipment for transportation. |

Instructor Comments

Student requires additional equipment operational experience under supervision of qualified operator.

Instructor Name: _____ Instructor Signature: _____

Student Name: _____ Student Signature: _____