

# FORK LIFT CERTIFICATION FORM

## Employee Information

(12/02)

E36

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Work Location: \_\_\_\_\_

License # \_\_\_\_\_ Class: \_\_\_\_\_ TRINFO class # \_\_\_\_\_

### Section 1 - Classroom Instruction

Compl'd \_\_\_\_/\_\_\_\_/\_\_\_\_ Hrs. \_\_\_\_\_

- Completed general topics classroom instruction
- Completed pre-op inspection classroom instruction

Instructor #1 initials \_\_\_\_\_

Instructor #2 initials \_\_\_\_\_

### Section II - Shop Session Instruction

Compl'd \_\_\_\_/\_\_\_\_/\_\_\_\_ Hrs. \_\_\_\_\_

- Completed PM and general procedures shop instruction
- Completed pre-op inspection shop instruction
- Completed vehicle starting and idling shop instruction
- Completed vehicle parking and shut-down shop instruction

Instructor #1 initials \_\_\_\_\_

Instructor #2 initials \_\_\_\_\_

### Section III - Skills Demonstration

Refer to the Evaluation Guide for the details of the demonstration

P	F	P	F	P	F
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1. Performs a thorough pre-op inspection and daily/weekly PM, as needed
2. Unloads pallets from a truck with the machine on the ground
3. Loads and unloads barrels on and from a truck
4. Parks and shuts down machine properly

\_\_\_\_\_ Date completed: \_\_\_\_\_ Vehicle Make: \_\_\_\_\_

**Evaluation Committee Initials** \_\_\_\_\_ Time spent w/Operator: \_\_\_\_\_ ID #: \_\_\_\_\_

### Certification

Attempt #  1  2  3

- Check if any variations were made in the evaluation and describe on reverse
- Employee **certified** for operation of Fork Lift
- Employee **not certified** - needs improvement on: \_\_\_\_\_

\_\_\_\_\_  
Certifier Signature

\_\_\_\_\_  
Employee Signature