

RECREATIONAL CONVEYANCE AREA NAME
PERSONNEL TRAINING CERTIFICATION

I, _____, do hereby certify that I have completed the training program conducted by the above-captioned ski area on _____ (date) and further certify that I understand and am capable of performing the operating procedures for the stations stated herein.

(Signature - Employee)

(Date)

The above-named person has completed the training program for the stations stated herein and has demonstrated the knowledge and ability to execute the functions of the station in a competent and satisfactory manner.

(Signature - Area Manager)

(Date)

POSITIONS IN WHICH QUALIFIED:

LIFT	OPERATOR STATION	ATTENDANT STATION	OTHER

** This form or an approved equal to be available in recreational conveyance areas.*

