



Operator Training for Rough Terrain Forklifts

Trainee Name _____

Employer _____

In the Classroom:

- | | |
|--|--|
| <input type="checkbox"/> Formal training, including video, discussion, tests | Traier _____ Date _____ |
| <input type="checkbox"/> Operating instructions, warnings, precautions | <input type="checkbox"/> Fork operation and limitation |
| <input type="checkbox"/> Differences between forklift and automobile | <input type="checkbox"/> Vehicle capacity |
| <input type="checkbox"/> Forklift controls | <input type="checkbox"/> Vehicle stability |
| <input type="checkbox"/> Engine operation | <input type="checkbox"/> Inspection and maintenance |
| <input type="checkbox"/> Steering and maneuvering | <input type="checkbox"/> Refueling and/or battery charging |
| <input type="checkbox"/> Visibility | <input type="checkbox"/> Operating limitations |

On the Equipment:

- | | |
|--|-------------------------|
| <input type="checkbox"/> Pre-operation inspection | Traier _____ Date _____ |
| <input type="checkbox"/> Function test | Traier _____ Date _____ |
| <input type="checkbox"/> Evaluation of trainees ability to operate equipment | Traier _____ Date _____ |
| <input type="checkbox"/> Enters equipment using 3 point method | |
| <input type="checkbox"/> Fastens seat belt | |
| <input type="checkbox"/> Sets parking brake, controls in neutral before starting | |
| <input type="checkbox"/> Familiarizes with controls before moving | |
| <input type="checkbox"/> Checks surroundings for hazards, obstacles, and personnel before moving | |
| <input type="checkbox"/> Can maneuver forklift around obstacles | |
| <input type="checkbox"/> Can correctly pick up load using the boom, inserting forks all the way, securing the load | |
| <input type="checkbox"/> Deposits load smoothly, backs out forklift. | |
| <input type="checkbox"/> Proper shut down method, lowers forks, set parking brake, shuts off engine. | |
| <input type="checkbox"/> Exits lift with 3 point method. | |

For the Employer:

- | | |
|---|-----------------------------|
| <input type="checkbox"/> Certify that the operator has been trained and evaluated | Supervisor _____ Date _____ |
| <input type="checkbox"/> Train operator on company forklift policies | Supervisor _____ Date _____ |
| <input type="checkbox"/> Familiarize operator on specific equipment used | Supervisor _____ Date _____ |
| <input type="checkbox"/> Ensure reevaluation when the operator is observed to be unsafe, When new equipment is introduced or when the conditions at the work site change. | Supervisor _____ Date _____ |