

**APPENDIX "C"**

**YAMHILL FIRE PROTECTION DISTRICT  
DRIVER OPERATOR EVALUATION CHECKLIST**

**DRIVER APPROVAL FORM**

Member's name (print) \_\_\_\_\_ has satisfactorily  
Demonstrated appropriate skills as indicated by the attached driver/operator check  
list(s). I \_\_\_\_\_, and \_\_\_\_\_  
Driving evaluators recommend that the above individual be granted authorization to  
drive the below referenced apparatus.

	YES	No
Driver License has been reviewed by the district Insurance and approved to drive district apparatus. (Attach copy of insurance approval)	___	___
Driver has completed the IFSTA Driver/Operator Course. (Attach course completion)	___	___
Driver has completed the NFPA 1002 course (Attach copy of completion)	___	___
Driver has completed the DPSST Task Book (Attach copy)	___	___
Driver has reviewed District Driving Policy, Procedure and Guidelines with Trainer.	___	___
Driver has completed the final examination (Attach Driver operator Evaluation checklist)	___	___
Apparatus Operator Driver Training Log (Attach Apparatus Operator Driver Training Log)	___	___

\_\_\_\_\_  
Officer Evaluator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

