## Minnesota Department of Transportation EQUIPMENT TRAINING/QUALIFICATION FORM

TRAINEE N	IAME:	LOCATION:						
TYPE OF EQUIPMENT: Skid Steer Loader								
EQUIPMEN	IT COURSE CODE: E	Q911000T		Hours Needed Prior to Qualification Min: 4 Max: 16				
		FORM INSTRU	JCTIONS					
<ul> <li>Equipment Walk-Around Procedures:</li> <li>► The walk-around procedure must be completed prior to on-the-job (OJT) training.</li> <li>► All walk-around procedures are equipment-specific. For a full explanation and information on the walk-around process, refer to the document Equipment Walk-Around Procedures (Form 4410).</li> <li>► Upon completion of the walk-around the trainer or mechanic will fill out the Walk-Around Training Record below. The mechanic and trainee will then sign the Walk-Around Training Sign-Off section where indicated stating that the training has been accomplished.</li> </ul>								
<ul> <li>On-The- Job (OJT) Training Procedures:</li> <li>A qualified equipment operator (trainer) will work with the trainee using the outline of training specific to the equipment being used. The trainer and trainee will use the outline of training to ensure all training is received.</li> <li>As training occurs the trainer will document the trainee's training hours (hours worked/hours of operation) in the On-The-Job (OJT) Training Record portion of this form.</li> </ul>								
<b>Training Sign-Off:</b> The supervisor will review the training record and sign off indicating the trainee is ready for evaluation.								
Qualification Sign-Off: The supervisor will evaluate the trainee's performance using the Supervisor								
Evaluation/Check Sheet form specific to the equipment, and then sign this form recommending or not recommending the trainee for qualification.								
		K-AROUND TRAIN						
DATE OF TRAINING	HOURS PERFORMING WALK-AROUND	HOURS SERVICING	MECHANIC'S COMMENTS					
TOTAL	HOURS SERVICING							
WALK-AROUND TRAINING SIGN-OFF								
TRAINEE	<u></u>			<u></u>				
	and understand the eq	uipment manual:	YES	NO				
During this training, I have performed and understand all of the proper servicing requirements and maintenance procedures of this piece of equipment:  YES  NO								
TRAINEE S	IGNATURE:		0	DATE:				
MECHANIC This trainee has completed a walk-around as specified above under Equipment Walk-Around Procedures.								
MECHANIC	SIGNATURE:			DATE:				

TRAINEE NA	ME:		SUB-AREA:				
TYPE OF EQI	UIPMENT: Skid	Steer Loader	EQ. COURSE CODE: EQ911000T  IFICATION: (Minimum): 4 (Maximum): 16				
NUMBER OF	HOURS NEEDI	ED PRIOR TO QU					
ON-THE-JOB (OJT) TRAINING RECORD							
DATE OF TRAINING	HOURS WORKED	HOURS OF OPERATION	TRAINER'S SIGNATURE/COMMENTS				
TOTAL OJT HOURS OF OPERATION							
		TRA	AINING SIGN-OFF				
SUPERVISO The training I be evaluated	hours listed ab	ove are accurate	e to the best of my knowledge and this trainee is ready to				
SUPERVISO	R SIGNATUR	E:	DATE:				
		QUALI	FICATION SIGN-OFF				
TRAINING E	VALUATOR (I	Evaluator must	be in the MMA or MAPE bargaining unit)				
□ After reviewing this training record for accuracy and completing a performance evaluation of this trainee in compliance with the <u>Supervisor Evaluation/Check Sheet</u> , I recommend qualification.							
			acy and completing a performance evaluation of this trainee in <u>Check Sheet</u> , I do not recommend this trainee for qualification.				
EVALUATOR SIGNATURE			EVALUATION DATE:				