Name of Driver in Training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Engine or Utility: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Pump Operations Evaluation:** Mark “P” for pass, “F” for fail on appropriate line, as applicable.

 Before Leaving Station

1. Conduct 360 inspection of apparatus.
2. Identify cab and pump panel instruments and controls.
3. Tilt cab and engage cab locks.

Pump Operations

*Evolution One*

1. Properly position apparatus. \_\_\_\_\_
2. Set parking brake. \_\_\_\_\_
3. Place pump in gear. \_\_\_\_\_
4. Chock wheels. \_\_\_\_\_
5. Supplied handline from booster tank. \_\_\_\_\_
6. Adjust pump discharge pressure, as necessary. \_\_\_\_\_
7. Transfer from booster tank to hydrant. \_\_\_\_\_\_
8. Adjust pump discharge pressure, as necessary. \_\_\_\_\_
9. Refill booster tank while supplying handline. \_\_\_\_\_
10. Shut down water flow. \_\_\_\_\_
11. Remove pump from gear. \_\_\_\_\_\_

*Evolution Two*

1. Properly position apparatus. \_\_\_\_\_
2. Set parking brake. \_\_\_\_\_
3. Place pump into gear. \_\_\_\_\_
4. Chock wheels. \_\_\_\_\_
5. Supply master stream from booster tank. \_\_\_\_\_
6. Adjust pump discharge pressure, as necessary. \_\_\_\_\_
7. Transfer from booster tank to hydrant. \_\_\_\_\_
8. Supply handline with master stream. \_\_\_\_\_
9. Adjust pump discharge pressure, as necessary. \_\_\_\_\_
10. Refill booster tank while flowing master stream and handline. \_\_\_\_\_
11. Shutdown water flow. \_\_\_\_\_
12. Remove pump from gear. \_\_\_\_\_

**To be completed by the Evaluating Officer: Mark “Y” for yes, “N” for no.**

1. Were all skills performed in a safe manner to the satisfaction of the evaluator? \_\_\_\_\_\_
2. Is the Trainee ready to operate this apparatus in an emergency situation? \_\_\_\_\_\_
3. Do you recommend that this Trainee ready to be qualified on this apparatus? \_\_\_\_\_\_

Name of Evaluating Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Signature of Evaluating Officer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Trainee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_