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**DEPARTMENT CHIEF'S SECTION: To be completed by the Chief of the Fire Department:**

	<b>Yes</b>	<b>No</b>
<b>Pump Operation Course:</b> The candidate has successfully completed an approved pump operation course		
The training log has at least ten hours of documented training time		
<b>Personal File:</b> All the required records have been collected and placed into the candidate's personal file.		

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**APPROVED ENGINE OPERATOR STATUS:**

A review of this Engine Operation certification form has shown that the candidate has met all the requirements set forth by this department and is hereby given the status of Approved Engine Operator.

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**Signature**

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**Date**