

# Forklift Operator Practical Evaluation

|                           |                              |
|---------------------------|------------------------------|
| <b>Operator's Name:</b>   | <b>Theory Training Date:</b> |
| <b>Evaluator/Trainer:</b> | <b>Evaluation Date:</b>      |
| <b>Equipment:</b>         |                              |

**SCORING**      **PASS**      **FAIL**      **N/A = Not Applicable**

| Pre-Operational Requirements   | Score | Notes |
|--|-------|-------|
| Performs pre-use inspection in accordance with company guidelines.   |       |       |
| Correctly completes required inspection documentation.   |       |       |
| Reports deficiencies in accordance with company guidelines.  |       |       |
| Wears required personal protection equipment (PPE).  |       |       |
| Post Start Up  | Score | Notes |
| Listens for unusual noises and sounds.   |       |       |
| Ensures that all safety devices are functioning as required.   |       |       |
| Ensures all dashboard components are functioning correctly.  |       |       |
| Tests functionality of parking brake.  |       |       |
| Checks all hydraulic operations including lift, lower, tilt, and side movements.                                       |       |       |
| Inspects and tests all foot pedals including the brake, clutch, inching, and gal pedals.                               |       |       |
| Uses 3-points of contact when accessing operator's cab.  |       |       |
| Pedestrians  | Score | Notes |
| Slows down and sounds audible warning devices for pedestrians when required.   |       |       |
| Establishes eye contact with pedestrians.  |       |       |
| Does not allow pedestrians to come near while operating the equipment.   |       |       |
| Is aware of rear end swing and ensures that not pedestrians are in the pathway of the swing prior to initiating turns. |       |       |
| Never allows pedestrian to cross beneath loads, forks, etc.  |       |       |
| Does not allow passengers to ride on equipment.  |       |       |

| Traveling   | Score | Notes |
|---|-------|-------|
| Wears seat belt consistently.   |       |       |
| Keeps body within operator compartment always.  |       |       |
| Looks in direction of travel before & while moving.   |       |       |
| Works in accordance with all travel guidelines, warning signs, floor load limits, and overhead clearances.                                |       |       |
| Uses truck lighting in dark areas.  |       |       |
| Travels with loads raised and titled back only enough to stabilize the load.  |       |       |
| Stops, starts, and make direction changes smoothly.   |       |       |
| Slows or stops are necessary at intersections and blind corners.  |       |       |
| Turns wide to see down travel path.   |       |       |
| Uses horn and other warning devices when required (To alert pedestrians, other equipment operators, and at blind spots and intersections. |       |       |
| Leaves three or more lengths for stopping when following another vehicle.   |       |       |
| Stays well away from drop-offs and railroad tracks.   |       |       |
| Avoids and removes debris, avoids holes and uneven ground.  |       |       |
| Crosses railway tracks at the correct 45-degree angle.  |       |       |
| Travels in reverse when vision is too obstructed to travel forward.   |       |       |

| Load Handling  | Score | Notes |
|--|-------|-------|
| Does not exceed equipment's rated load capacity.   |       |       |
| Is always aware of combined center of gravity and maintains it well within the equipment's stability triangle. |       |       |
| Uses attachments per manufacturer's instructions.  |       |       |
| Approaches load squarely and slowly.   |       |       |
| Spreads forks to appropriate width to assist in load stability.  |       |       |
| Does not turn with forks elevated.   |       |       |
| Keeps mast vertical (load level) when high stacking.   |       |       |
| Enters & exits pallets properly (forks level & properly spaced).   |       |       |
| Engages at least 2/3 of load with forks.   |       |       |
| Does not unnecessarily raise and tilt load.  |       |       |
| Aligns loads sufficiently in racks or stacks.  |       |       |

| Ramps, Docks, and Trailers  | Score | Notes |
|---|-------|-------|
| Approaches ramps and grades straight.   |       |       |
| Travels up and down ramps in the correct direction.   |       |       |
| Restrains trailer correctly.  |       |       |
| Secures dock/bridge plate.  |       |       |
| Drives appropriate speed on ramps, docks, and trailers.                                       |       |       |
| Lifting Personnel   | Score | Notes |
| Uses a properly designed platform.  |       |       |
| Ensures that personnel are using the correct fall protection systems.                         |       |       |
| Maintains communication throughout lifting and lowering.                                      |       |       |
| Remains at the controls always.   |       |       |
| Shutdown and Leaving the Operators Position   | Score | Notes |
| Parks in a designated area.   |       |       |
| Lowers the forks all the way.   |       |       |
| Neutralizes all controls.   |       |       |
| Deenergizes equipment and turns off fuel source.  |       |       |
| Blocks the wheels if parking on an incline.   |       |       |
| Engages the parking brake.  |       |       |
| Uses 3 points of contact to exit the operator's cab.  |       |       |
| Refueling/Recharging  | Score | Notes |
| Ensures equipment is deenergized and fuel source is off.                                      |       |       |
| Wears appropriate Personal Protective Equipment (PPE).  |       |       |
| Follows all workplace and equipment specific guidelines relating to refueling and recharging. |       |       |

**Additional Comments and Recommendations:**

|   |                              |                             |
|---|------------------------------|-----------------------------|
| The operator has successfully completed the evaluation and is qualified to operate the equipment. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
|---|------------------------------|-----------------------------|

|  |  |
|--|--|
| <b>Evaluator / Trainer<br/>Signature</b> |  |
|--|--|