

7-2533 (6-99)

Bureau of Reclamation

DAM OPERATOR PROFICIENCY REVIEW

Name of Dam Operator: _____

Dam Operator is the Primary Alternate

Name of Dam(s): _____

Region: _____

Area/Field Office: _____

Operating Entity, if Transferred Work: _____

Date of Last Classroom Training: _____

Onsite Training Location: _____

Instructor Name: _____ Code: _____

Instructor Name: _____ Code: _____

Completed training in the use of: (Instructor Check as Completed)

SOP and other operating and reference documents

Reservoir Operating Procedures

EAP and emergency management responsibilities

Operations related to major control gates/valves and other mech. equip.

Instrumentation purposes, locations, readings, maintenance, etc.

Operating Log

Performance parameters, modes of failure, visual observations

Maintenance management system and related document needs

Personnel safety procedures

Communications, attendance, and access factors related to operations

Other specific duties and responsibilities related to the dam

Needed improvements or additional information:

Acknowledged by: _____ Date: _____

(Signed by Dam Operator or alternate)

Validated by: _____ Date: _____

(Signed by principal Onsite Instructor)