

**BOAT OPERATOR APPLICATION & VERIFICATION**

**Boat Operator Contact Information:**

Name:			
Phone:		Email:	
Address:			
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip Code</i>

**Emergency Contact Information:**

Name:			
Phone:		Relationship:	
Address:			
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip Code</i>

**Anticipated Need:** *You want to go where to do what on which boat?*

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**Prior Boating Experience:**

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**Faculty Approval:**

Name	Signature	

*For Staff Only*

**Knowledge and Skills Proficiency**

	Operator has demonstrated:	Date:
	Cal Boating & Waterways	
	Knowledge of working area	
	VHF Radio Use	
	Vessel outfitting and launching	
	Vessel operation & maneuvering	
	Vessel breakdown & stowage	

**Qualification Levels: Date:**

	Basic – Confined Water	
	Nearshore < 2 nm	
	Offshore > 2 nm	
	Davit Launching	
	Trailing	
	14' Whaler	
	16' Bayrunner	
	19' Zodiac	
	21' Munson	