Administrative Information

SMALL BOAT OPERATOR NAME

DATE

(1-13)

SMALL BOAT OPERATOR AUTHORIZATION

Instructions

- Upon completion of the checkout process and meeting all minimum requirements, Vessel Operations Coordinators (VOCs) must complete a Small Boat Operator Authorization Letter for each person who will be operating any small boat(s) within that Line Office Program.
- VOCs shall reissue Small Boat Operator Authorization Letters annually to ensure currency of all certifications and training requirements, and to verify a measure of operational proficiency.

LINE/STAFF OFFICE	PROGRAM			FACILITY/LABORATORY		
STREET ADDRESS			CITY		STATE	ZIP CODE
OPERATOR'S PHONE NUMBER			OPERATOR'S	TOR'S E-MAIL ADDRESS		
VESSEL OPERATIONS COORDINATOR NAME			LINE OFFICE SMALL BOAT OFFICER NAME			
Training and Certificates Informat	ion					
TRAINING COURSE or CERTIFICATE			AGENCY	1	SSUE DATE	EXPIRATION DATE
NOAA Small Boat Component Course			NOAA			N/A
TRAINING COURSE or CERTIFICATE			AGENCY	1	SSUE DATE	EXPIRATION DATE
Personnel Qualifications Standards (PQS)			NOAA			N/A
TRAINING COURSE or CERTIFICATE			ISSUING AGENCY		SSUE DATE	EXPIRATION DATE
Cardio-Pulmonary Resuscitation (CPR) with AED						
TRAINING COURSE or CERTIFICATE			ISSUING AGENCY		SSUE DATE	EXPIRATION DATE
First-Aid						
TRAINING COURSE or CERTIFICATE			ISSUING AGENCY		SSUE DATE	EXPIRATION DATE
TRAINING COURSE or CERTIFICATE		ISSUING	ISSUING AGENCY		SSUE DATE	EXPIRATION DATE
TRAINING COURSE or CERTIFICATE		ISSUING	ISSUING AGENCY		SSUE DATE	EXPIRATION DATE
The Operator named above He/she is hereby authorized	I to operate the follo	owing NO	AA small bo	at(s) in the capa		ion as required.
SMALL BOAT NAME	NOAA HUL	L REG. #	OPERATING	RESTRICTIONS		
VOC NAME					DATE	
VOC NAME	VOC	SIGNATURE			DATE	