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NAME *(Last, First, Initial)*

EQUIPMENT OPERATOR'S QUALIFICATION RECORD
(EXCEPT AIRCRAFT)
For use of this form, see AR 600-55; the proponent agency is DCS, G3/5/7.

SECTION I - OFFICIAL QUALIFICATIONS *(Continued)*

TYPE OF EQUIPMENT	SIZE	SPECIAL QUALIFICATION	DATE QUALIFIED	QUALIFIED AT	NAME OF EXAMINER

SECTION III - PERFORMANCE RECORD *(Continued)*
(List chronologically as "credits" - awards, training, retraining, testing, retesting, roadeos, permit renewal, relicensing, etc.; and as "debits" - accidents, arrests, violations, warnings, revocations, suspensions, etc.)

DATE	CREDITS	DEBITS	TYPE OR NATURE	ACTION TAKEN