



Appendix 8

Operator Previous Experience Form

Trainee Details

Name: Date:

Address:

.....

Postcode: Tel:

Previous / Current Licence Details

Does the trainee hold a current lorry loader Operator's licence?

If yes, please provide the name of the training provider:

Name of the Accrediting Body through which this licence was achieved:

If applicable, please provide the identity number:

Licence Issue Date: Licence Expiry Date:

Experience Details

How much experience has the trainee had operating lorry loaders (include details of make, model, rated capacity, attachments and controls)? Please also give details of experience obtained in the last 12 months.

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.....

Details of lorry loaders the trainee will be operating in future (include make, model, rated capacity, attachments and controls):

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.....
.....

I confirm that I have gained over 15 hours' experience in the operation of a lorry loader within the last 12 months:

..... (Trainee's Signature)

Manager's Name: Manager's Position:

Manager's Signature:

Personal Information: As part of its provision of training courses, ALLMI collects personal data from individual trainees. ALLMI respects the privacy of each trainee and is committed to ensuring that any personal data it holds is utilised in a fair and lawful way in accordance with UK data protection legislation. Further details regarding ALLMI's commitment to data protection can be found in ALLMI's Data Protection Policy, which is available at www.allmi.com/dataprotectionpolicy, or in hard copy upon request.