

**MANCHESTER • BOSTON
REGIONAL AIRPORT
→ IET DRIVER TRAINING RECORD →**

NAME (PRINT): _____

POSITION: _____

ORGANIZATION: _____

DRIVER'S LICENSE STATE/NO. _____

DRIVER'S LICENSE EXPIRATION DATE: _____

I agree to abide by all rules, regulations and procedures prescribed for the operations of a vehicle within the airport operations area.

I certify that I hold a current and valid driver's license. If for any reason my license becomes invalid, I will notify Airport Operations immediately.

SIGNED:

DATE:

DRIVER ACKNOWLEDGEMENT

I hereby acknowledge that I have received training administered by my company/organization pertaining to vehicle and pedestrian operations in the non-movement areas and understand the restrictions and limitations for movement area operations.

This course is provided to serve as an overview of the Airport's rules, regulations and procedures and is intended to supplement a more comprehensive and practical training program provided by your organization. Evidence of proficiency in the training administered by your organization must be provided to the Airport prior to receiving a driver permit.

Vehicle operators must comply with the provisions as outlined in this Driver Training course and must adhere to the procedures for operating a vehicle in the movement/non-movement areas of the AOA. Any person found operating outside of the defined parameters of the non-movement areas may be subject to fines, permit suspension and/or revocation. Further, these actions may constitute criminal trespass and result in arrest.

Properly permitted vehicle operators performing a push-back or repositioning aircraft are afforded limited access to the movement area when engaged in these activities. No other ground vehicle activity in the movement area is warranted or permitted.

I have received and read this Airport Driver Acknowledgement.

SIGNED:

DATE:

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COMPANY/ORGANIZATION USE ONLY

I certify that the above named employee is proficient in the driver training administered by the below company/organization training program and is authorized to complete the airport's Interactive Employee Training program.

Authorized Representative: _____ Date: _____

Company/Organization: _____

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AIRPORT USE ONLY

PERMITTED OPERATING AREA:

- TIER I - MOVEMENT AREAS (AOA-YELLOW)
- TIER II – LIMITED ACCESS MOVEMENT AREAS (AOA-GREEN)
- TIER III - NON-MOVEMENT AREAS (AOA-ORANGE)
- TIER IV – NON-MOVEMENT AREAS (AOA-WHITE)

I certify that the above named individual has satisfactorily completed Driver Training.

MANCHESTER AIRPORT REPRESENTATIVE

Date: _____