

BOSUN REQUIRMENTS CHECKLIST

Name: _____ Initial date: _____

| Item | Date | Grade (1 – 5) | Approver Signature | Approver Rank |
|--|------|------------------|--------------------|------------------|
| <input type="checkbox"/> Certified at deck 1 | | | | |
| <input type="checkbox"/> Current member of DOT drug testing pool. | | | | |
| <input type="checkbox"/> Demonstrate proper attire and behavior with passengers and crew | | | | |
| <input type="checkbox"/> Perform all the departure checklist activities. | | | | |
| <input type="checkbox"/> Demonstrate management of single up activities. | | | | |
| <input type="checkbox"/> Demonstrate management of departure activities | | | | |
| <input type="checkbox"/> Demonstrate management of landing activities. | | | | |
| <input type="checkbox"/> Demonstrate management of line handling for the Ballard locks. | | | | |
| <input type="checkbox"/> Explain and demonstrate bosun roles and responsibilities during an MOB emergency. | | | | |
| <input type="checkbox"/> Explain and demonstrate bosun roles and responsibilities during fire emergency | | | | |
| <input type="checkbox"/> Explain and demonstrate bosun roles and responsibilities during grounding emergencies | | | | |
| <input type="checkbox"/> Explain and demonstrate bosun roles during a medical emergency | | | | |
| <input type="checkbox"/> Demonstrate proper command and response protocol | | | | |
| <input type="checkbox"/> Name all deck lines and functions | | | | |
| <input type="checkbox"/> Show location for fire stations and fire extinguishers. | | | | |
| <input type="checkbox"/> Explain the channel marker types and position of ship relative to those markers. | | | | |

Steamer Virginia V Foundation
Deck Crew Advancement Procedure

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|--|------|------------------|--------------------|------------------|
| <input type="checkbox"/> Demonstrate VHF radio proficiency for proper ship to ship and ship to shore communications. | | | | |
| <input type="checkbox"/> Explain how to set up all lines for approaching the Ballard Locks in each direction. | | | | |
| <input type="checkbox"/> Demonstrate the set up for all lines when approaching the Ballard Locks in each direction. | | | | |
| <input type="checkbox"/> Demonstrate ability to train and coach crew at deck 1,2 3, and 4 positions | | | | |
| <input type="checkbox"/> Demonstrate ability to manage deck crew activities | | | | |

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| <input type="checkbox"/> Completion of minimum training sea time within the past year. | _____ | | | |
| | 1 | | | |
| | _____ | | | |
| | 2 | | | |
| | _____ | | | |
| | 3 | | | |
| | _____ | | | |
| | 4 | | | |
| | _____ | | | |
| | 5 | | | |

The candidate has successfully demonstrated proficiency in all of the above areas and is ready for a captain's review

_____ name _____ (mate) _____ date

I have reviewed the candidate and approve / disapprove certification to bosun for the following reasons:

_____ name _____ (captain) _____ date