



Traffic Control Supervisor Authorization Form

**This model form/template must be customized to meet your Agency’s needs.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of individual)

has been designated as a Traffic Control/Work Zone Supervisor by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of employer)

based on the individual’s training, experience, and demonstrated skills in the following.

**Training requirements required by an employer:**

Employees shall be trained in the proper fundamentals of traffic control/work zone safety before being assigned as a Traffic Control Supervisor. Traffic Control setup and work practices shall conform to the CCR 1598, 1599, and California Manual on Uniform Traffic Control Devices (Manual). The training and instructions shall be provided:

* Initial training before assignment
* Reauthorization required every three years
* Annual refresher training during department/toolbox training

**Traffic Control Supervisor Evaluation Date Evaluated/Passed by**

* Knows Flagger Methods, Equipment, and Hand Signals \_\_\_\_\_ \_\_\_\_\_
* Understands Traffic Control Templates and Installation \_\_\_\_\_ \_\_\_\_\_
* Follows CA-MUTCD and Local Traffic Control Regulations \_\_\_\_\_ \_\_\_\_\_
* Properly sets up Work Zone, Signs, and Device Installation \_\_\_\_\_ \_\_\_\_\_
* Knows Elements of a Traffic Control/Work Zone \_\_\_\_\_ \_\_\_\_\_
* Understands Hi-Viz and PPE Requirements \_\_\_\_\_ \_\_\_\_\_
* Can perform Traffic Control Inspection and Documentation \_\_\_\_\_ \_\_\_\_\_
* Knows procedures for accidents and work zone incidents \_\_\_\_\_ \_\_\_\_\_

Review of supporting documents related to Traffic Control Supervisor Authorization:

(Attach copies.)

\_\_\_\_\_\_ Training, classes, and workshops attended

\_\_\_\_\_\_ Years of experience in supervisor or lead person: Number of years/months \_\_\_\_

\_\_\_\_\_\_ Formal Education, Union Apprenticeship, etc.

\_\_\_\_\_\_ On-the-Job Performance: (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Evaluated and Designated by:

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Individual assigned as Traffic Control/Work Zone Supervisor:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_