

March 9, 2009

FROM:

Ryan Lantz 
Chief, Operations Branch
Division of Reactor Safety

TO:

Steve Garchow
Chief Examiner, Operations Branch

SUBJECT: INITIAL OPERATOR LICENSING EXAMINATION ASSIGNMENT

You have been assigned as Chief Examiner of the Cooper Nuclear Station initial licensing examination. The operating test has been scheduled to be completed by September 26, 2009. Thank you for contacting the Cooper Nuclear Station to finalize the details of the examination. You are reminded that the RPS/IP system must be maintained to ensure the examiners and numbers of candidates are accurate. In addition, you are reminded that only qualified examiners are permitted to conduct any part of the examination.

EXAM ASSIGNMENT TICKLER

Chief:	Steve Garchow	Facility:	Cooper	Date of Written Exam:	9/18/2009
Start of Op Test:			9/21/2009	End of Op Test: 9/26/2009	
Written Exam Developed By: NRC / Facility			Operating Test Developed By: NRC / Facility		
Due Date	Description	Date Complete	Initials	Notes	
3/20/2009	Written Exam & Op Test Dates Confirmed	3/9/2009	JMG		
5/15/2009	NRC Examiners & Facility Contact Assigned	3/9/2009	JMG	Bill Gilbert	
5/15/2009	Facility Contact Briefed on Security & Other Req's	3/9/2009	JMG	Password: cooper2009	
5/15/2009	Corporate Notification Letter sent	4/14/2009	JMG	ES-201 Att-4 produced by CE	
6/19/2009	Reference material due (if NRC authored)	NA	JMG	ES-201 Att-3	
6/29/ 7/3/2009	Integrated exam outlines due	6/29/09	JMG		
7/10/2009	Outlines reviewed by CE; feedback approved by BC	7/7/09	JMG	ES-201-2 signed by CE & BC	
7/10/2009	Feedback on integrated outlines provided to facility	7/7/09	JMG		
8/10 8/31/2009	DRAFT exam / docs / support reference material due	8/10/2009	JMG		
8/14/2009	Peer review of written exam complete	NA	JMG	Document review on ES-401-9	
8/14/2009	Preliminary license applications due	8/14/2009	JMG	NRC Forms 398/396	
8/21/2009	Preliminary license applications and waivers reviewed	8/19/2009	JMG		
8/21/2009	DRAFT exam reviewed by CE; feedback approved by BC	8/18/2009	JMG		
8/21/2009	Feedback on DRAFT exam provided to facility	8/18/2009	JMG		
1/26/2009	On-site validation & 10% audit of license applications	9/4/2009	JMG		
9/4/2009	Final applications due & List of Applicants prepared	9/9/09	JMG	ES-201-4 prepared by LA	
9/11/2009	Final applications approved & waiver letters sent	9/16/09	JMG		
9/11/2009	Branch Chief approves FINAL exam (Written & Op Test)	9/16/09	JMG	LA produces / BC signs Exam Approval Letter (ES-201 Att-5)	
9/11/2009	Proctoring/written exam admin guidelines reviewed w/ facility	9/3/09	JMG		
9/14/2009	Exam material to exam team	9/14/09	JMG		
9/21/2009	Administer Operating Test	9/25/09	JMG		
10/3/2009	Facility post-exam documentation due	10/1/09	JMG		
10/3/2009	NRC written exam grading completed	9/25/09	JMG	ES-403-1 to BC	
10/3/2009	Examiner's document op test results on ES 303's	10/13/09	JMG		
10/10/2009	Chief Examiner review of written exam & op test completed	10/13/09	JMG	Signed ES 303's to BC	
10/17/2009	Branch Chief review of exam results completed	10/14/09	JMG		
10/24/2009	Waivers/deferrals reviewed for impact on licensing decision	10/14/09	JMG		
10/24/2009	License/Denial letters mailed; Facility notified of results	10/15/09	JMG		
10/24/2009	RPS/IP number of examinees updated	9/22/09	JMG	print Report-21	
11/7/2009	Examination Report Issued	11/4/09	JMG	produced by CE	
11/14/2009	SUNSI checklist complete and exam docs to ADAMS	3/29/09	JMG	SUNSI checklist to LA	
11/21/2009	Ref Mat'l Returned after Final Resolution of Appeals	NA	JMG		
Replaces NUREG-1021, Revision 9, Supp 1, Forms ES-201-1 and ES-501-1					

Facility: Cooper Nuclear Station Date of Examination: 09/21/2009

Item	Task Description	Initials		
		a	b*	c#
1. W R I T T E N	a. Verify that the outline(s) fit(s) the appropriate model, in accordance with ES-401.	<input checked="" type="checkbox"/>	the	JMB
	b. Assess whether the outline was systematically and randomly prepared in accordance with Section D.1 of ES-401 and whether all K/A categories are appropriately sampled.	<input checked="" type="checkbox"/>	the	JMB
	c. Assess whether the outline over-emphasizes any systems, evolutions, or generic topics.	<input checked="" type="checkbox"/>	the	SMB
	d. Assess whether the justifications for deselected or rejected K/A statements are appropriate.	<input checked="" type="checkbox"/>	the	SMB
2. S I M U L A T O R	a. Using Form ES-301-5, verify that the proposed scenario sets cover the required number of normal evolutions, instrument and component failures, technical specifications, and major transients.	<input checked="" type="checkbox"/>	the	SMB
	b. Assess whether there are enough scenario sets (and spares) to test the projected number and mix of applicants in accordance with the expected crew composition and rotation schedule without compromising exam integrity, and ensure that each applicant can be tested using at least one new or significantly modified scenario, that no scenarios are duplicated from the applicants' audit test(s), and that scenarios will not be repeated on subsequent days.	<input checked="" type="checkbox"/>	the	JMB
	c. To the extent possible, assess whether the outline(s) conform(s) with the qualitative and quantitative criteria specified on Form ES-301-4 and described in Appendix D.	<input checked="" type="checkbox"/>	the	JMB
3. W / T	a. Verify that the systems walk-through outline meets the criteria specified on Form ES-301-2: (1) the outline(s) contain(s) the required number of control room and in-plant tasks distributed among the safety functions as specified on the form (2) task repetition from the last two NRC examinations is within the limits specified on the form (3) no tasks are duplicated from the applicants' audit test(s) (4) the number of new or modified tasks meets or exceeds the minimums specified on the form (5) the number of alternate path, low-power, emergency, and RCA tasks meet the criteria on the form.	<input checked="" type="checkbox"/>	the	SMB
	b. Verify that the administrative outline meets the criteria specified on Form ES-301-1: (1) the tasks are distributed among the topics as specified on the form (2) at least one task is new or significantly modified (3) no more than one task is repeated from the last two NRC licensing examinations	<input checked="" type="checkbox"/>	the	SMB
	c. Determine if there are enough different outlines to test the projected number and mix of applicants and ensure that no items are duplicated on subsequent days.	<input checked="" type="checkbox"/>	the	SMB
4. G E N E R A L	a. Assess whether plant-specific priorities (including PRA and IPE insights) are covered in the appropriate exam sections.	<input checked="" type="checkbox"/>	the	SMB
	b. Assess whether the 10 CFR 55.41/43 and 55.45 sampling is appropriate.	<input checked="" type="checkbox"/>	the	SMB
	c. Ensure that K/A importance ratings (except for plant-specific priorities) are at least 2.5.	<input checked="" type="checkbox"/>	the	SMB
	d. Check for duplication and overlap among exam sections.	<input checked="" type="checkbox"/>	the	SMB
	e. Check the entire exam for balance of coverage.	<input checked="" type="checkbox"/>	the	SMB
	f. Assess whether the exam fits the appropriate job level (RO or SRO).	<input checked="" type="checkbox"/>	the	SMB

a. Author: William Gilbert (Signature) Date: 9/21/2009
 b. Facility Reviewer (*): Tim Chard (Signature) Date: 9/21/09
 c. NRC Chief Examiner (#): Steve Garchow (Signature) Date: 9/10/09
 d. NRC Supervisor: Ryanowitz (Signature) Date: 9/11/09

Note: # Independent NRC reviewer initial items in Column "c"; chief examiner concurrence required.
 * Not applicable for NRC-prepared examination outlines

Facility: Cooper		Date of Examination: 9/21/09		Operating Test Number:	
1. General Criteria			Initials		
			a	b*	c#
a.	The operating test conforms with the previously approved outline; changes are consistent with sampling requirements (e.g., 10 CFR 55.45, operational importance, safety function distribution).	<input checked="" type="checkbox"/>	TR	JMB	
b.	There is no day-to-day repetition between this and other operating tests to be administered during this examination.	<input checked="" type="checkbox"/>	TR	SMB	
c.	The operating test shall not duplicate items from the applicants' audit test(s). (see Section D.1.a.)	<input checked="" type="checkbox"/>	TR	SMB	
d.	Overlap with the written examination and between different parts of the operating test is within acceptable limits.	<input checked="" type="checkbox"/>	TR	SMB	
e.	It appears that the operating test will differentiate between competent and less-than-competent applicants at the designated license level.	<input checked="" type="checkbox"/>	TR	SMB	
2. Walk-Through Criteria			--	--	--
a.	Each JPM includes the following, as applicable: <ul style="list-style-type: none"> • initial conditions • initiating cues • references and tools, including associated procedures • reasonable and validated time limits (average time allowed for completion) and specific designation if deemed to be time-critical by the facility licensee • operationally important specific performance criteria that include: <ul style="list-style-type: none"> - detailed expected actions with exact criteria and nomenclature - system response and other examiner cues - statements describing important observations to be made by the applicant - criteria for successful completion of the task - identification of critical steps and their associated performance standards - restrictions on the sequence of steps, if applicable 	<input checked="" type="checkbox"/>	TR	SMB	
b.	Ensure that any changes from the previously approved systems and administrative walk-through outlines (Forms ES-301-1 and 2) have not caused the test to deviate from any of the acceptance criteria (e.g., item distribution, bank use, repetition from the last 2 NRC examinations) specified on those forms and Form ES-201-2.	<input checked="" type="checkbox"/>	TR	SMB	
3. Simulator Criteria			--	--	--
The associated simulator operating tests (scenario sets) have been reviewed in accordance with Form ES-301-4 and a copy is attached.		<input checked="" type="checkbox"/>	TR	SMB	
		Printed Name / Signature		Date	
a.	Author	William Gilbert		9/8/2009	
b.	Facility Reviewer(*)	Tim Chard		9-8-09	
c.	NRC Chief Examiner (#)	Steve Garchow		9/10/09	
d.	NRC Supervisor	Ryan Lantz		9/14/09	
NOTE: * The facility signature is not applicable for NRC-developed tests. # Independent NRC reviewer initial items in Column "c"; chief examiner concurrence required.					

Facility: Cooper		Date of Exam: 9/21/09 Scenario Numbers: 1/2/3/4 Operating Test No.:		
QUALITATIVE ATTRIBUTES		Initials		
		a	b*	c#
1.	The initial conditions are realistic, in that some equipment and/or instrumentation may be out of service, but it does not cue the operators into expected events.	<input checked="" type="checkbox"/>	TR	SMG
2.	The scenarios consist mostly of related events.	<input checked="" type="checkbox"/>	TR	SMG
3.	Each event description consists of <ul style="list-style-type: none"> the point in the scenario when it is to be initiated the malfunction(s) that are entered to initiate the event the symptoms/cues that will be visible to the crew the expected operator actions (by shift position) the event termination point (if applicable) 	<input checked="" type="checkbox"/>	TR	SMG
4.	No more than one non-mechanistic failure (e.g., pipe break) is incorporated into the scenario without a credible preceding incident such as a seismic event.	<input checked="" type="checkbox"/>	TR	SMG
5.	The events are valid with regard to physics and thermodynamics.	<input checked="" type="checkbox"/>	TR	SMG
6.	Sequencing and timing of events is reasonable, and allows the examination team to obtain complete evaluation results commensurate with the scenario objectives.	<input checked="" type="checkbox"/>	TR	SMG
7.	If time compression techniques are used, the scenario summary clearly so indicates. Operators have sufficient time to carry out expected activities without undue time constraints. Cues are given.	<input checked="" type="checkbox"/>	TR	SMG
8.	The simulator modeling is not altered.	<input checked="" type="checkbox"/>	TR	SMG
9.	The scenarios have been validated. Pursuant to 10 CFR 55.46(d), any open simulator performance deficiencies or deviations from the referenced plant have been evaluated to ensure that functional fidelity is maintained while running the planned scenarios.	<input checked="" type="checkbox"/>	TR	SMG
10.	Every operator will be evaluated using at least one new or significantly modified scenario. All other scenarios have been altered in accordance with Section D.5 of ES-301.	<input checked="" type="checkbox"/>	TR	SMG
11.	All individual operator competencies can be evaluated, as verified using Form ES-301-6 (submit the form along with the simulator scenarios).	<input checked="" type="checkbox"/>	TR	SMG
12.	Each applicant will be significantly involved in the minimum number of transients and events specified on Form ES-301-5 (submit the form with the simulator scenarios).	<input checked="" type="checkbox"/>	TR	SMG
13.	The level of difficulty is appropriate to support licensing decisions for each crew position.	<input checked="" type="checkbox"/>	TR	SMG
Target Quantitative Attributes (Per Scenario; See Section D.5.d)		Actual Attributes		
1.	Total malfunctions (5-8)	6/6/5/6	<input checked="" type="checkbox"/>	TR SMG
2.	Malfunctions after EOP entry (1-2)	2/1/1/2	<input checked="" type="checkbox"/>	TR SMG
3.	Abnormal events (2-4)	3/4/3/2	<input checked="" type="checkbox"/>	TR SMG
4.	Major transients (1-2)	1/1/1/1	<input checked="" type="checkbox"/>	TR SMG
5.	EOPs entered/requiring substantive actions (1-2)	2/2/3/2	<input checked="" type="checkbox"/>	TR SMG
6.	EOP contingencies requiring substantive actions (0-2)	1/2/2/1	<input checked="" type="checkbox"/>	TR SMG
7.	Critical tasks (2-3)	2/3/2/2	<input checked="" type="checkbox"/>	TR SMG

Facility: Cooper			Date of Exam: 9/21/2009			Operating Test No.:											
A P P L I C A N T	E V E N T T Y P E	Scenarios												T O T A L	M I N I M U M (*)		
		1 (SPARE)			2			3			4						
		C R E W P O S I T I O N			C R E W P O S I T I O N			C R E W P O S I T I O N			C R E W P O S I T I O N						
		S R O	A T C	B O P	S R O	A T C	B O P	S R O	A T C	B O P	S R O	A T C	B O P				
													R	I	U		
RO 1 X SRO-I <input type="checkbox"/> SRO-U <input type="checkbox"/>	RX											1	1	1	1	0	
	NOR					1							1	1	1	1	
	I/C					3						1	4	4	4	2	
	MAJ					1						1	2	2	2	1	
	TS												0	0	2	2	
RO 2,3 X SRO-I <input type="checkbox"/> SRO-U <input type="checkbox"/>	RX							1					1	1	1	0	
	NOR					1							1	1	1	1	
	I/C					3		3					6	4	4	2	
	MAJ					1		1					2	2	2	1	
	TS												0	0	2	2	
RO 4 X SRO-I <input type="checkbox"/> SRO-U <input type="checkbox"/>	RX					1							1	1	1	0	
	NOR								1				1	1	1	1	
	I/C					3			1				4	4	4	2	
	MAJ					1			1				2	2	2	1	
	TS												0	0	2	2	
RO 5,7 X SRO-I <input type="checkbox"/> SRO-U <input type="checkbox"/>	RX								1				1	1	1	0	
	NOR											1	1	1	1	1	
	I/C								3			3	6	4	4	2	
	MAJ								1			1	2	2	2	1	
	TS												0	0	2	2	

Facility:		Cooper		Date of Exam:		9/21/2009		Operating Test No.:										
A P P L I C A N T	E V E N T T Y P E	Scenarios										T O T A L	M I N I M U M (*)					
		1			2			3			4							
		C R E W P O S I T I O N			C R E W P O S I T I O N			C R E W P O S I T I O N			C R E W P O S I T I O N							
		S R O	A T C	B O P	S R O	A T C	B O P	S R O	A T C	B O P	S R O		A T C	B O P				
												R	I	U				
RO 6 X SRO-I <input type="checkbox"/> SRO-U <input type="checkbox"/>	RX														1			1
	NOR					1									1	1	1	1
	I/C					3						1			4	4	4	2
	MAJ					1						1			2	2	2	1
	TS														0	0	2	2
RO <input type="checkbox"/> SRO-I 2,3 SRO-U <input type="checkbox"/>	RX				1										1	1	1	0
	NOR							1							1	1	1	1
	I/C					3		3							6	4	4	2
	MAJ					1		1							2	2	2	1
	TS							3							3	0	2	2
RO <input type="checkbox"/> SRO-I 1 X SRO-U <input type="checkbox"/>	RX				1										1	1	1	0
	NOR									1					1	1	1	1
	I/C					3				2					5	4	4	2
	MAJ					1				1					2	2	2	1
	TS									2					2	0	2	2
RO <input type="checkbox"/> SRO-I <input type="checkbox"/> SRO-U 2,3 X	RX														0	1	1	0
	NOR				1				1						2	1	1	1
	I/C				3				1						4	4	4	2
	MAJ				1				1						2	2	2	1
	TS				3										3	0	2	2

Instructions:

- Check the applicant level and enter the operating test number and Form ES-D-1 event numbers for each event type; TS are not applicable for RO applicants. ROs must serve in both the "at-the-controls (ATC)" and "balance-of-plant (BOP)" positions; Instant SROs must serve in both the SRO and the ATC positions, including at least two instrument or component (I/C) malfunctions and one major transient, in the ATC position. If an Instant SRO *additionally* serves in the BOP position, one I/C malfunction can be credited toward the two I/C malfunctions required for the ATC position.
- Reactivity manipulations may be conducted under normal or *controlled* abnormal conditions (refer to Section D.5.d) but must be significant per Section C.2.a of Appendix D. (*) Reactivity and normal evolutions may be replaced with additional instrument or component malfunctions on a 1-for-1 basis.
- Whenever practical, both instrument and component malfunctions should be included; only those that require verifiable actions that provide insight to the applicant's competence count toward the minimum requirements specified for the applicant's license level in the right-hand columns.

Facility:		Date of Exam:									Operating Test No.:						
A P P L I C A N T	E V E N T T Y P E	Scenarios															
		1			2			3			4			T O T A L	M I N I M U M (*)		
		CREW P O S I T I O N			CREW P O S I T I O N			CREW P O S I T I O N			CREW P O S I T I O N						
		S R O	A T C	B O P		R	I	U									
RO	RX													0	1	1	0
<input type="checkbox"/> SRO-I	NOR				1									1	1	1	1
<input type="checkbox"/> SRO-U 1	I/C				3									3	4	4	2
<input checked="" type="checkbox"/> X	MAJ				1									1	2	2	1
	TS				3									3	0	2	2
RO	RX													1	1	0	
<input type="checkbox"/> SRO-I	NOR													1	1	1	
<input type="checkbox"/> SRO-U	I/C													4	4	2	
<input type="checkbox"/>	MAJ													2	2	1	
<input type="checkbox"/>	TS													0	2	2	
RO	RX													1	1	0	
<input type="checkbox"/> SRO-I	NOR													1	1	1	
<input type="checkbox"/> SRO-U	I/C													4	4	2	
<input type="checkbox"/>	MAJ													2	2	1	
<input type="checkbox"/>	TS													0	2	2	
RO	RX													1	1	0	
<input type="checkbox"/> SRO-I	NOR													1	1	1	
<input type="checkbox"/> SRO-U	I/C													4	4	2	
<input type="checkbox"/>	MAJ													2	2	1	
<input type="checkbox"/>	TS													0	2	2	

Instructions:

- Check the applicant level and enter the operating test number and Form ES-D-1 event numbers for each event type; TS are not applicable for RO applicants. ROs must serve in both the "at-the-controls (ATC)" and "balance-of-plant (BOP)" positions; Instant SROs must serve in both the SRO and the ATC positions, including at least one instrument or component (I/C) malfunctions and one major transient, in the ATC position. If an Instant SRO *additionally* serves in the BOP position, one I/C malfunction can be credited toward the two I/C malfunctions required for the ATC position.
- Reactivity manipulations may be conducted under normal or *controlled* abnormal conditions (refer to Section D.5.d) but must be significant per Section C.2.a of Appendix D. (*) Reactivity and normal evolutions may be replaced with additional instrument or component malfunctions on a 1-for-1 basis.
- Whenever practical, both instrument and component malfunctions should be included; only those that require verifiable actions that provide insight to the applicant's competence count toward the minimum requirements specified for the applicant's license level in the right-hand columns.

Facility: Cooper Nuclear Station Date of Examination: 9/21/09 Operating Test No.:

Competencies	APPLICANTS															
	CRS				ATCO				BOP				RO			
	RO				RO	X			RO	X			RO			
	SRO-I	X			SRO-I	X			SRO-I	X			SRO-I			
SRO-U	X			SRO-U				SRO-U				SRO-U				
SCENARIO				SCENARIO				SCENARIO				SCENARIO				
1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	
Interpret/Diagnose Events and Conditions	3,4, 5,6, 7,8	3,4, 5,6, 7,8	3,4, 5,6, 7	2,3, 4,5, 7,8, 9,10	3,5, 7	4,5, 6, 7,8	3,4, 6,7	3,4, 5,7, 8,9, 10	4,6, 7,8	1,3, 5,6, 7	5,6	2,4, 7,8, 9,10				
Comply With and Use Procedures (1)	all	all	all	all	2,3, 5, 7	2,4, 5,6, 7	2,3, 5,6, 7	3,4, 5,6, 8,9, 10	1,4, 6, 7,8	1,3, 5,6, 7	1,5, 6	1,3, 4, 7,8, 9,10				
Operate Control Boards (2)	na	na	na	na	2,3, 5,7	2,4, 5,7, 8	2,3, 4,5, 6,7	6,8, 9,10	1,4, 6, 7,8	1,3, 5,6, 7	1,5, 6	1,2, 3,5, 7,8, 9,10				
Communicate and Interact	all	all	all	all	all	all	all	all	all	all	all	all				
Demonstrate Supervisory Ability (3)	all	all	all	all	na	na	na	na	na	na	na	na				
Comply With and Use Tech. Specs. (3)	3,5	2,3	3,4	2,3	na	na	na	na	na	na	na	na				

- Notes:
- (1) Includes Technical Specification compliance for an RO.
 - (2) Optional for an SRO-U.
 - (3) Only applicable to SROs.

Instructions:

Check the applicants' license type and enter one or more event numbers that will allow the examiners to evaluate every applicable competency for every applicant.

Facility:		Date of Exam: 9/19/09		Exam Level: RO X	SRO X	
Item Description	Initial					
	a	b*	c#			
1. Questions and answers are technically accurate and applicable to the facility.	5	TRC	JMB			
2. a. NRC K/As are referenced for all questions. b. Facility learning objectives are referenced as available.	5	TRC	JMB			
3. SRO questions are appropriate in accordance with Section D.2.d of ES-401	5	TRC	JMB			
4. The sampling process was random and systematic (If more than 4 RO or 2 SRO questions were repeated from the last 2 NRC licensing exams, consult the NRR OL program office).	5	TRC	JMB			
5. Question duplication from the license screening/audit exam was controlled as indicated below (check the item that applies) and appears appropriate: <input type="checkbox"/> the audit exam was systematically and randomly developed; or <input type="checkbox"/> the audit exam was completed before the license exam was started; or <input type="checkbox"/> the examinations were developed independently; or <input type="checkbox"/> the licensee certifies that there is no duplication; or <input checked="" type="checkbox"/> other (explain) Scenario #2 was developed by the utility and modified by the Chief Examiner. Scenario 1, 3, and 4 were selected by the Chief Examiner with no knowledge of the contents of the ILT Audit examination. The written examination and the JPMs have zero duplication between the Audit Exam and the NRC exam.	5	TRC	JMB			
6. Bank use meets limits (no more than 75 percent from the bank, at least 10 percent new, and the rest new or modified); enter the actual RO / SRO-only question distribution(s) at right.	Bank	Modified	New	5	TRC	JMB
	49/14	0/0	26/11			
7. Between 50 and 60 percent of the questions on the RO exam are written at the comprehension/ analysis level; the SRO exam may exceed 60 percent if the randomly selected K/As support the higher cognitive levels; enter the actual RO / SRO question distribution(s) at right.	Memory	C/A	5	TRC	JMB	
	34/6	41/19				
8. References/handouts provided do not give away answers or aid in the elimination of distractors.	5	TRC	JMB			
9. Question content conforms with specific K/A statements in the previously approved examination outline and is appropriate for the tier to which they are assigned; deviations are justified.	5	TRC	JMB			
10. Question psychometric quality and format meet the guidelines in ES Appendix B	5	TRC	JMB			
11. The exam contains the required number of one-point, multiple choice items; the total is correct and agrees with the value on the cover sheet.	5	TRC	JMB			
		Printed Name / Signature	Date			
a. Author	William Gilbert		9/8/09			
b. Facility Reviewer (*)	Tim Chard		9-8-09			
c. NRC Chief Examiner (#)	Stephen Garchow / Jim Ham		9/10/09			
d. NRC Regional Supervisor	DAN LANTZ / RPO		9/14/09			
Note:	* The facility reviewer's initials/signature are not applicable for NRC-developed examinations. # Independent NRC reviewer initial items in Column "c"; chief examiner concurrence required.					

Facility:		Date of Exam:		Exam Level: RO <input type="checkbox"/> SRO <input type="checkbox"/>		
Item Description				Initials		
				a	b	c
1.	Clean answer sheets copied before grading			J	TC	SMB
2.	Answer key changes and question deletions justified and documented			N/A	NA	NA
3.	Applicants' scores checked for addition errors (reviewers spot check > 25% of examinations)			J	TC	SMB
4.	Grading for all borderline cases (80 ±2% overall and 70 or 80, as applicable, ±4% on the SRO-only) reviewed in detail			N/A	NA	SMB
5.	All other failing examinations checked to ensure that grades are justified			N/A	NA	NA
6.	Performance on missed questions checked for training deficiencies and wording problems; evaluate validity of questions missed by half or more of the applicants			J	TC	SMB
				Printed Name/Signature		Date
a.	Grader			<u>William Gilbert</u>		9/24/09
b.	Facility Reviewer(*)			<u>Tim Chad</u>		9-24-09
c.	NRC Chief Examiner (*)			<u>Jim Hart</u>		10/13/09
d.	NRC Supervisor (*)			<u>Ryan Cantz</u>		10/14/09
(*) The facility reviewer's signature is not applicable for examinations graded by the NRC; two independent NRC reviews are required.						

Operator Licensing Exam Schedule

From 09/01/2009 To 09/30/2010

Region: 4

Phase Code: 5

Exam Week	Site/Docket No./Insp Rpt #	# Candidates		Type	Exam Author	Chief Examiner	Examiners Assigned
08/31/2009	Cooper / 05000298 / TAC #: X02409			Prep	FFF	GARCHOW, STEPHEN M.	DEVERCELLY, RICHARD GARCHOW, STEPHEN M.
09/21/2009	Cooper / 05000298 / TAC #: X02409	RO - 7 SROU - 3	SROI - 3	Admin	FFF	GARCHOW, STEPHEN M.	APGER, GABRIEL W. DEVERCELLY, RICHARD GARCHOW, STEPHEN M.

1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of 9/15-26, 2009 as of the date of my signature. I agree that I will not knowingly divulge any information about these examinations to any persons who have not been authorized by the NRC chief examiner. I understand that I am not to instruct, evaluate, or provide performance feedback to those applicants scheduled to be administered these licensing examinations from this date until completion of examination administration, except as specifically noted below and authorized by the NRC (e.g., acting as a simulator booth operator or communicator is acceptable if the individual does not select the training content or provide direct or indirect feedback). Furthermore, I am aware of the physical security measures and requirements (as documented in the facility licensee's procedures) and understand that violation of the conditions of this agreement may result in cancellation of the examinations and/or an enforcement action against me or the facility licensee. I will immediately report to facility management or the NRC chief examiner any indications or suggestions that examination security may have been compromised.

2. Post-Examination

To the best of my knowledge, I did not divulge to any unauthorized persons any information concerning the NRC licensing examinations administered during the week(s) of 9/15-26, 2009. From the date that I entered into this security agreement until the completion of examination administration, I did not instruct, evaluate, or provide performance feedback to those applicants who were administered these licensing examinations, except as specifically noted below and authorized by the NRC.

PRINTED NAME	JOB TITLE / RESPONSIBILITY	SIGNATURE (1)	DATE	SIGNATURE (2)	DATE	NOTE
1. William Gilbert	OTS (sup) / Exam Develop / Examiner	<i>[Signature]</i>	5/13/09	<i>[Signature]</i>	9/25/09	
2. Gregory Jensen	Exam Developer / Exam Review	<i>[Signature]</i>	5/22/09	<i>[Signature]</i>	9/30/09	①
3. Andrew HRABEK	EXAM VALIDATION	<i>[Signature]</i>	5/11/09	<i>[Signature]</i>	9/29/09	①
4. Tim Chand	Asst Trainer / Maint / Reviewer	<i>[Signature]</i>	6-25-09	<i>[Signature]</i>	9/29/09	②
5. Gregory Abram	Exam Development	<i>[Signature]</i>	7/9/09	<i>[Signature]</i>	9/29/09	
6. Don Pea	Simulator	<i>[Signature]</i>	7/16/09	<i>[Signature]</i>	9/29/09	
7. Jim Florence	Simulator	<i>[Signature]</i>	9/16/09	<i>[Signature]</i>	9/29/09	
8. BRIAN WADDELL	Simulator	<i>[Signature]</i>	7/16/09	<i>[Signature]</i>	9/29/09	
9. RON CONAWAY	SIMULATOR	<i>[Signature]</i>	7/16/09	<i>[Signature]</i>	9/29/09	
10. Matt Kreitek	Simulator Support	<i>[Signature]</i>	7/20/09	<i>[Signature]</i>	9/29/09	
11. Sharon Kefelsen	Simulator Support	<i>[Signature]</i>	7/20/09	<i>[Signature]</i>	9/30/09	
12. Kenneth Noshpish	SRO - WCC	<i>[Signature]</i>	7-21-09	<i>[Signature]</i>	9/29/09	②
13. Karla F. Neal	SRO - CREW C	<i>[Signature]</i>	7/21/09	<i>[Signature]</i>	9/29/09	②
14. John Myers	STE CREW C	<i>[Signature]</i>	7/21/09	<i>[Signature]</i>	9/29/09	②
15. NICK EGGERT	RO - CREW E	<i>[Signature]</i>	7/21/09	<i>[Signature]</i>	9/29/09	②

NOTES:

- ① Signed off per Tele com.
- ② Signed off per Email.

1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of 9-18 → 9/26/09, as of the date of my signature. I agree that I will not knowingly divulge any information about these examinations to any persons who have not been authorized by the NRC chief examiner. I understand that I am not to instruct, evaluate, or provide performance feedback to those applicants scheduled to be administered these licensing examinations from this date until completion of examination administration, except as specifically noted below and authorized by the NRC (e.g., acting as a simulator booth operator or communicator is acceptable if the individual does not select the training content or provide direct or indirect feedback). Furthermore, I am aware of the physical security measures and requirements (as documented in the facility licensee's procedures) and understand that violation of the conditions of this agreement may result in cancellation of the examinations and/or an enforcement action against me or the facility licensee. I will immediately report to facility management or the NRC chief examiner any indications or suggestions that examination security may have been compromised.

2. Post-Examination

To the best of my knowledge, I did not divulge to any unauthorized persons any information concerning the NRC licensing examinations administered during the week(s) of 9-18-9/26/09. From the date that I entered into this security agreement until the completion of examination administration, I did not instruct, evaluate, or provide performance feedback to those applicants who were administered these licensing examinations, except as specifically noted below and authorized by the NRC.

PRINTED NAME	JOB TITLE / RESPONSIBILITY	SIGNATURE (1)	DATE	SIGNATURE (2)	DATE	NOTE
1. Scott Debusier	SRO cert ops Training	<i>Scott Debusier</i>	7/21/09	Scott Debusier	9/27/09	①
2. JAMES LERIC	SHIFT MANAGER	<i>James Leric</i>	7-21-09	Jim Leric	9/24/09	①
3. Mark Gunnella	Reactor Operator	<i>Mark Gunnella</i>	7/21/09	Mark Gunnella	9/24/09	①
4. KHAIL DIA	SED	<i>Khail Dia</i>	7/20/09	Khail Dia	9/24/09	①
5. CURTIS MARTIN	REACTOR Operator	<i>Curtis Martin</i>	9/1/09	Curtis Martin	9/25/09	①
6. Brad Bare	CRS SRO	<i>Brad Bare</i>	9/1/09	Brad Bare	9/25/09	①
7. KEITH KING	RO	<i>Keith King</i>	9-1-09	Keith King	9/25/09	①
8. Ed Pentfield	OPERATIONS MANAGER	<i>Ed Pentfield</i>	9-9-09	Ed Pentfield	9/26/09	①
9. MICK JOE	OPS TRNG SUPV	<i>Mick Joe</i>	9/18/09	Mick Joe	9/26/09	①
10. Jerry Long	ADM-TRNG	<i>Jerry Long</i>	9/21/09	Jerry Long	9/27/09	①
11. Ed Jahn	SRO Training	<i>Ed Jahn</i>	9/21/09	Ed Jahn	9/25/09	①
12. JW Boyd	SRJ Training	<i>JW Boyd</i>	9/21/09	JW Boyd	9/25/09	①
13. MARK S. HANSEN	SRJ Training	<i>Mark Hansen</i>	9-21-09	Mark Hansen	9/25/09	①
14. Tammy Knapp	OPERATIONS INSTRUCTOR	<i>Tammy Knapp</i>	9-21-09	Tammy Knapp	9/25/09	①
15.						

NOTES: ① signed off per Email

1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of _____ as of the date of my signature. I agree that I will not knowingly divulge any information about these examinations to any persons who have not been authorized by the NRC chief examiner. I understand that I am not to instruct, evaluate, or provide performance feedback to those applicants scheduled to be administered these licensing examinations from this date until completion of examination administration, except as specifically noted below and authorized by the NRC (e.g., acting as a simulator booth operator or communicator is acceptable if the individual does not select the training content or provide direct or indirect feedback). Furthermore, I am aware of the physical security measures and requirements (as documented in the facility licensee's procedures) and understand that violation of the conditions of this agreement may result in cancellation of the examinations and/or an enforcement action against me or the facility licensee. I will immediately report to facility management or the NRC chief examiner any indications or suggestions that examination security may have been compromised.

2. Post-Examination

To the best of my knowledge, I did not divulge to any unauthorized persons any information concerning the NRC licensing examinations administered during the week(s) of _____. From the date that I entered into this security agreement until the completion of examination administration, I did not instruct, evaluate, or provide performance feedback to those applicants who were administered these licensing examinations, except as specifically noted below and authorized by the NRC.

	PRINTED NAME	JOB TITLE / RESPONSIBILITY	SIGNATURE (1)	DATE	SIGNATURE (2)	DATE	NOTE
1.							
2.							
3.	Mack Cunnella	Reactor Operator	<i>Mack Cunnella</i>	7/21/09			①
4.							
5.	MICHAEL BARTON	EXAMINATION EXPERT CONTRACTOR	<i>Michael Barton</i>	8-20-09	Michael Barton	8/24/09	②
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

NOTES: ① signed off per Tele com
 ② See separate sheet for these signatures