

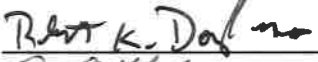
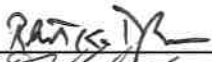



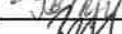

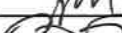


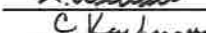


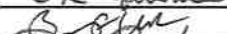




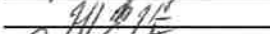

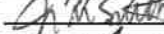
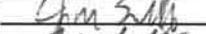

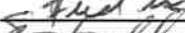
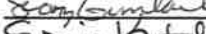





1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of 4/18-4/24/16 ^{5-27/16} 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 4/18-4/24/16 ^{5-27/16} 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.

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PRINTED NAME	JOB TITLE / RESPONSIBILITY	SIGNATURE (1)	DATE	SIGNATURE (2)	DATE	NOTE
1. Robert K. Douglass	OPS		12/14/15		5/1/16	
2. David J. Haberkorn	OPS Supervisor		12-14-15		5-16-16	
3. JOE BILICH	OPS INSTRUCTOR		12/14/15		6/5/16	(2)
4. FRANK MEREITA	OPS VALIDATION		1/4/16		5/10/16	
5. David Pratt	OPS VALIDATION		1/4/16		5/4/16	
6. Rodney Whitmore	OPS Validation		1/4/16		5/5/16	
7. CRAIG KAUFMAN	OPS VALIDATION		1/4/16		5/5/16	
8. Benjamin Wreck	OPS Validation		1/4/16		5/1/16	
9. KATHA WICKLAND	OPS VALIDATION		1-4-16		5-9-16	
10. Nicholas Johnson	OPS Validation		1-7-16		5-9-16	
11. Jeffery N Jacobson	OPS Validation		1-19-16		5-3-16	
12. JASON M. Smith	SEM OP		1/20/16		5/3/16	
13. Fred Swihart	OPS Validation		1-21-16		5-10-16	
14. Scott Gundlach	OPS Validation		1/20/16		5/1/16	
15. Erin Ketelsen	OSS		2/1/16		5/3/16	

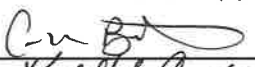
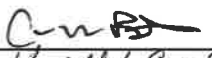
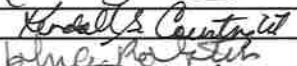
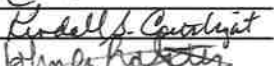

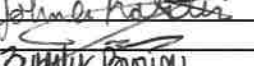

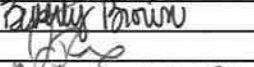
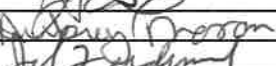
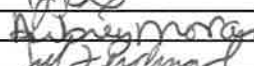
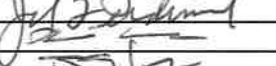
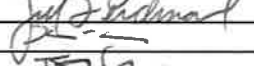
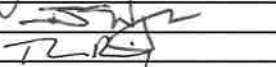
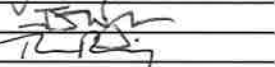
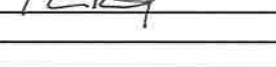
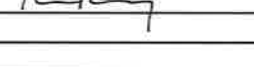
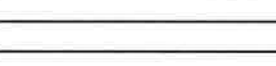
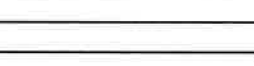
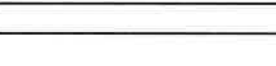
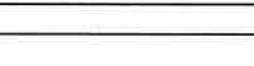


NOTES: (2) Per phone conversation. Contractor - left the company 12/15.

1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of 4/18-4/27/16 ^{5/2/16} 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 4/18-5/2/16. 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. Chad Britton	SRO		2/4/16		5-11-16	
2. RANDALL S. COURTEIGHT	OPS VALIDATION		3-14-16		5-11-16	
3. John Halston	OPS Validation		3-14-16		5-11-16	
4. JORDEN NELSON	Admin Support		3-22-16		5-5-16	
5. Beverly Brown	Admin Support		4/6/16		5-11-16	
6. James Cox	Facility Rep		4/13/16		5/3/16	
7. Aubrey Morgan	Sequester		4-14-16		5-11-16	
8. Jed Ferdinand	Sequester		4/15/16		5/11/16	
9. Kevin Armit	Sequester		4/16/16		5/4/16	
10. JAY WAGNER	SEQUESTER		4/18/16		5/3/16	
11. THOMAS RESIG	PROCTOR/SEQUESTER		5/2/16		5/3/16	
12.						
13.						
14.						
15.						

NOTES:

Quad Cities Nuclear Station

ES-201

Examination Security Agreement

1. Pre-Examination

I acknowledge that I have acquired specialized knowledge about the NRC licensing examinations scheduled for the week(s) of 4/18-4/24/16 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.

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PRINTED NAME

1. RAYMOND J. VENCI
2. Deane L. Hearn
3. RAYMOND BAKER
4. ANDY SEYMOUR
5. BRAD MAURER
6. CHRIS BURKHART
7. ERIC TROTZ
8. Enzo Martinez
9. JASON SWAIN
10. MIKE MACLENNAN
11. RONALD BRUMMET
12. CHAD FERRIS
13. Dave Bowman
14. John Lechmaier
15. MICHAEL D. GOODALE

JOB TITLE / RESPONSIBILITY

- EXAM Author
- Exam Author
- ITSA
- ITIS / Visior Support
- OPS VALIDATOR
- DTPS
- Sim Tech Support
- IT Sim Support
- SRO FACILITY REP
- VALIDATOR (SRO)
- VALIDATOR (RO)
- VALIDATOR (RO)
- Validator
- Simulator Support
- OPS

SIGNATURE (1)

[Handwritten signatures for each of the 15 individuals listed in the previous section]

DATE	SIGNATURE (2)	DATE	NOTE
8-11-15	<i>[Signature]</i>	5/1/16	
8/11/15	<i>[Signature]</i>	5/1/16	
8-14-15	<i>[Signature]</i>	5/1/16	
9/23/15	<i>[Signature]</i>	5/1/16	
10/2/15	<i>[Signature]</i>	5/1/16	
10/23/15	<i>[Signature]</i>	5/1/16	
11/11/15	<i>[Signature]</i>	5/1/16	
12-7-15	<i>[Signature]</i>	5/1/16	
12-7-15	<i>[Signature]</i>	5/1/16	
12-7-15	<i>[Signature]</i>	5/1/16	
12/8/15	<i>[Signature]</i>	5/1/16	
12-11-15	<i>[Signature]</i>	5/1/16	
12/14/15	<i>[Signature]</i>	5/1/16	

NOTES: ① Retired from company. Contacted via phone and gave verbal concurrence for Post-Exam sign-off.