· In Reply Refer To: Docket: STN 50-482

Wolf Creek Nuclear Operating Corporation

ATTN: Bart D. Withers

President and Chief Executive Officer

P.O. Box 411

Burlington, Kansas 66839

Gentlemen:

SUBJECT: MEETING TO PRESENT CHANGES IN LICENSED OPERATOR EXAMINATION AND

REQUALIFICATION PROGRAMS

On Thursday, November 30, 1989, representatives listed in Enclosure 1 met in the Region IV office to discuss ongoing changes in the licensed operator program and related questions. The discussions centered around four basic areas: (1) the Generic Fundamentals Examination Section, (2) the Site Specific Examination Section, (3) the licensed operator requalification program, and (4) miscellaneous changes and issues affecting licensed operators. The overlays and handouts from this meeting are Enclosure 2. If you have any questions, please feel free to contact J. L. Pellet, Chief, Operator Licensing Section, at (817)860-8159.

Sincerely,

Samuel J. Collins, Director Division of Reactor Projects

Enclosures: As stated

cc w/enclosures: (see next page)

*C:OLS D:DRS \$0,000 JLPellet/1b LJCallan / /89

D:DRP SJCollins

*Previously concurred

9001050104 891222 PDR ADDCK 05000482 PNU Wolf Creek Nuclear Operating Corporation

Wolf Creek Nuclear Operating Corp. ATTN: Gary Boyer, Plant Manager P.O. Box 411 Burlington, Kansas 66839

Shaw, Pittman, Potts & Trowbridge ATTN: Jay Silberg, Esq. 1800 M Street, NW Washington, D.C. 20036

Public Service Commission
ATTN: Chris R. Rogers, P.E.
Manager, Electric Department
P.O. Box 360
Jefferson City, Missouri 65102

U.S. Nuclear Regulatory Commission ATTN: Regional Administrator, Region III 799 Roosevelt Road Glen Ellyn, Illinois 60137

Wolf Creek Nuclear Operating Corp.
ATTN: Otto Maynard, Manager
Regulatory Services
P.O. Box 411
Burlington, Kansas 66839

Kansas Corporation Commission ATTN: Robert Elliot, Chief Engineer Utilities Division 4th Floor - State Office Building Topeka, Kansas 66612-1571

Office of the Governor State of Kansas Topeka, Kansas 66612

Attorney General 1st Floor - The Statehouse Topeka, Kansas 66612

Chairman, Coffey County Commission Coffey County Courthouse Burlington, Kansas 66839 Kansas Department of Health and Environment Bureau of Air Quality & Radiation Control

ATTN: Gerald Allen, Public Health Physicist Division of Environment Forbes Field Building 321 Topeka, Kansas 66620

U.S. Nuclear Regulatory Commission ATTN: Senior Resident Inspector P.O. Box 311 Burlington, Kansas 66839

U.S. Nuclear Regulatory Commission ATTN: Regional Administrator, Region IV 611 Ryan Plaza Drive, Suite 1000 Arlington, Texas 76011

bcc w/enclosures: bcc to DMB (1E42)

bcc distrib. by RIV:

R.D. Martin, RA Section Chief (DRP) RIV File RSTS Operator DRS Licensee & Debt Collection Branch NRR: Project Manager ATTN: Leah Tremper

RPB-DRSS MIS System DRP Project Engineer, DRP/B J. L. Pellet J. L. Pellet Reading File

ATTENDANCE LIST

AP&L

Edward D. Wentz, Operations Training Supervisor Paul D. Crossland, Operations Training Supervisor Ed Force, Manager Training Kenneth Canitz, Operations Training Supervisor

GSU

Dale Andrews, Director, Nuclear Training Rick Jackson, Supervisor, Operations Training

HL&P

Jim Constantin, Supervisor, Simulator Training William Dowdy, Shift Supervisor Paul Appleby, Training Manager

LP&L

Charles J. Toth, Training Manager Jay O'Hern, Operations Training Supervisor Wayne L. Smith, Simulator Training Supervisor

NPPD

Jeff Boyd, SRO/RO Instructor Mark Gillan, Action Operations Training Supervisor Duane Shallenberger, SRO/RO Instructor

OPPD

Jeff Spilker, Operations Engineer Michael Lazar, Supervisor, Operations Technical Training

PSC

Ted Borst, Nuclear Training Manager Ken Einig, Nuclear Training Supervisor M. E. Deniston, Superintendent of Operations David Goss, Nuclear Regulatory Affairs Manager

TU

Jerry Walker, Operation/Engineering Training Manager Jerry McMahon, Manager Training John Ellard, Simulator Training Supervisor Greg Bell, Nuclear Licensing

WCNOC

James A. Zell, Manager Training

CASE

Owen L. Thero Edna Ottney

NRC

John L. Pellet, Chief, Operator Licensing Section, NRC Ted Szymanski, Technical Assistant, NRC-OLB Mark Satorius, Operator Licensing Examiner, NRC-Region IV Jack Keeton, Operator Licensing Examiner, NRC-Region IV Stephen L. McCrory, Operator Licensing Examiner, NRC-Region IV Kriss Kennedy, Operator Licensing Examiner, NRC-Region IV Joel Wiebe, NRC-CPPD

OPERATOR LICENSING PROGRAM MEETING NOVEMBER 30, 1989

GENERIC FUNDAMENTALS EXAM SECTION

SITE SPECIFIC EXAM SECTION

REQUALIFICATION EXAMINATIONS

MISCELLANEOUS TOPICS

GENERIC FUNDAMENTALS EXAM SECTION

- 3x/year, early Oct., Feb., & June.
- 100 points, 2½ hour, mult. choice.
- Required unless previously licensed since '82 on comparable (B/PWR) plant.
- Stand-alone exam (part of exam process but not averaged in with SSES).
- 80% to pass.
- Eligible to take if in program leading to license.
- Passing is condition of application (can't apply for license until passed).

SITE SPECIFIC EXAM SECTION

- · Single category, 80% to pass.
- · 100 point exam.
- · 4½ hour length.
- Multiple choice with some matching.
 Impacts on use of fac. bank. Scores may be lower since no credit for partial knowledge. Less memorization since recognition vs. recall.
- Pre-exam review normal & encouraged.
 Technical and content OK. Expect postadmin comments by end of exam week.
- · Copy of modified sample plan attached.
- Material problems recurrent. Impact greater with new format. Being identified in pre-review not enough.
- SSES exam sets getting smaller. May be problem as requal uses more resources.
- SRO Upgrade same as instant in plant.

REQUALIFICATION EXAMINATIONS

- All 1st round satisfactory in RIV, some barely.
- Facility encouraged to submit proposed exam with other material.
- Security of exam material must be addressed, both before and after some or all of facility bank submitted to NRC.
- NRC team members assigned by facility need to understand role and want job.
 They have major role in success or failure of program & individuals.

REQUALIFICATION EXAMINATIONS

Performance weaknesses in 1st round:

- Written, especially sect. A,

- JPM failure due to procedure problem,
- JPM failure due to inability to follow procedure (occasional),

 Evaluator ability to cue and objectively evaluate.

- Lack of operator understanding of open reference test, and
- Lack of familiarity with ES-601.
- · Material weaknesses in 1st round:

- Written item construction,

- Simulator ISCT identification,

- Simulator time critical task ident.,

- JPM critical task definition,

- JPM objective performance standard,

- Written content of sect. A vs. B,

- JPM problems not found during validation/walkdown, and
- Sample plans weak or nonexistent.
- · Recent changes involving simulator:

- At least 2 ISCTs per person,

- Goal is examine as operate & train, limited to 5 + STA, and
- All SROs evaluated directing operators, using EOPs, & implementing E-plan.

MISCELLANEOUS NEWS

- Several problems in last year related to licensed operators assuming watch when not qualified to do so. Examples include:
 - Going beyond two year medical time period.
 - Failing to recognize going inactive.
 - Returning to watch after failing annual requal exam before re-exam.
 - At dual unit site after giving up license on one unit.
- Policy on response to second failure of NRC requalification exam under review.
 Case basis for now.
- · Schedule for RIV attached for '90 & '91.
- <u>Advance</u> copies of revised 396 & 398 attached. LA sending limited supply in December. Use for applications after February 1, 1990.

BOILING WATER REACTOR (BWR) SITE SPECIFIC EXAM SECTION SAMPLE PLAN

		RO	SRO
E / APE'S	(K1, K2, K3, A1, A2, SG)	POINTS	POINTS
GROUP 1		13	17
GROUP 2		19	26
GROUP 3		4	
PLANT SYSTEMS	(K1-6, A1-4, SG)		
GROUP 1		28	23
GROUP 2		19	13
GROUP 3		4	4
PLANT WIDE GENERICS		13	17
	TOTAL POIN	TS: 100	100

PRESSURIZED WATER REACTOR (PWR) SITE SPECIFIC EXAM SECTION SAMPLE PLAN

EPE'S GROUP 1 GROUP 2 GROUP 3	(K1, K2, K3, A1, A2, SG)	RO POINTS 16 17 3	SRO POINTS 24 16 3
PLANT SYSTEMS	(K1-6, A1-4, SG)		
GROUP 1		23	19
GROUP 2		20	17
GROUP 3		8	4
PLANT WIDE GENERICS		13	17

TOTAL POINTS: 100

100

Region IV Facility Exam Requests as of 29-Nov-89

FY	AN01	AN02	. op	ONS	FCS	: FSV
	11/13/89 6 RO		6/25/90 6 UG	2/26/90 4 UG	5/14/90 4 RD	1/29/90 1 55.0
	8/27/90 6 RO 6 SRO	7/30/90 RQ-30 8/6/90 RQ	11/27/90 B RO 6 UG 2 SRO	**************		
91	2/91 R0-30 2/91 B R0	12/10/90 6 RO 6 UG	6/91 6 RO 2 SRO	5/91 6 RO 2 SRO 5 UG 1st SIM	10/7/90 6 RO 3 SRO 1st SIM	
	8/91 6 RO 6 UG		6/91 RQ-30		5/91 5 RO 4 SRO	
92	8/92 6 RO 6 UG	12/91 6 RO 6 UG	11/91 4 RO 2 SRO 2 UG	11/91 RQ-30	10/91 4 R0 2 SR0 4 UG 10/91 R0-20	
RO.		7/92 RQ-30	6/92 6 FO 2 UG	5/92 6 RO 11/92 RO-R	5/92 3 RO 1 SRO 3 UG	
999999	5/89-12 2/91-30 2/93-R	7/90-30 7/92-30	7/89-12 6/91-30 6/93-R	9/89-12 - 11/91-30 11/92-R	4/89-5 10/91-20 10/93-R	

Region IV Facility Exam Requests as of 29-Nov-89

FY	RB	STP	WF3	, wc
1.1110000000	10/16/89 2 RO 2 UG	3/12/90 RQ-30 3/19/90 RQ		11/20 5 RO 1 SRO
	1/29/90 R0-30 2/5/90 R0 8/6/90 5R3SR0	9/24/90 4 RO 12 SRO	9/10/90 5 SRO 10 UG	
91	6/91 6 RO 2 SRO 3 UG	9/91 4 RO 8 SRO	2/91 RT	10/22/90 RG-30 10/29/90 RG
			9/91 RQ-30	4/91 9 RO 3 SRO
92	12/91 R0-30 12/91 6 R0 2 SR0 3 UG	3/92 RD-30	2/92 10 RO	10/91 RQ-30
==		9/92 3 RO 5 SRO	9/92 RT	4/92 9 RO 6 UG
R890123	1/90-30 12/91-30	3/90-30 3/92-30	9/99-12 9/91-30 9/93-R	10/90-30

DRAFT

SUMMERY OF CHANGES TO HEC FORM 398

Item 4.d	- Added clarifying statement to indicate this is to be obsched only if application is to seemd license to add additional unit(s).
Item 4.f	- Added "(Category)" to Operating. Added "Hedical".
Item 4.E	- Added a new item "Date Passed Generic Fundamentals Examination Section".
Item 12.3	- Changed wording to "Certified Startup Program Completed" for clarification.
Item 12.5	- Changed wording to "Extra Person On Shift In Control Room (13-week minimum)" for clarification.
Item 12.5a	- Added a new item "Time On Shift Above 20% Power (6-week minimum)".
Item 14.a	- Added the words "That Is Based Upon A Systems Approach to Training" for clarification.
Item 15	- Added "Date and Result of Most Recent NRC Administered Requalification Examination".
Item 19.a	- Added the wording "I further certify that I have notified my current employer of: (1) all previous employers: (2) any instance where I have been tested by a Health and Human Services (HHS) Certified Drug Testing Laboratory or a Licensee's testing facility for alcohol or a controlled substance, and the test results exceeded the cutoff levels established pursuant to 10 CFR Part 26; (3) any instances where I have been arrested for the sale, use or possession of a controlled substance described in 10 CFR Part 26; and (4) any reasons for removal or revocation of unescorted access at a nuclear facility".
Item 19.b and	- Moved 19.b and 19.c together. Applicable box must now be

Item 19.b and Item 19.c

- Moved 19.b and 19.c together. Applicable box must now be checked. Also edded block for typed name of Training Coordinator and Senior Hanagement Representative On Site.

FOR NRC USE - Under maiver category added "Medical".



PERSONAL QUALIFICATION STATEMENT-LICENSES TO REMAIN VALID, THIS FORM MUST NOT BE ALTERED

DRAFT

- TYPE OF APPLICATION

 24 NEW "X" IF YOU ARE A NEW APPLICANT. COMPLETE EACH CATEGORY OF THE FORM COMPLETELY, POLLOWING THE INSTRUCTIONS BELOW. THIS IS TO INCLUDE ALL EDUCATION, TRAINING AND EXPERIENCE THAT YOU HAVE RECEIVED UP TO THE DATE OF THIS APPLICATION, NOTE: SEE ITEM 14 THERE IS AN EXCEPTION, ALSO, THIS BLOCK IS TO BE MARKED IF PREVIOUS NEW APPLICATION WAS WITHDRAWN, PLEASE WRITE "WITHDRAW" NEXT
 - 25 the 24 POR 25 THRU 25, COMPLETE EACH CATEGORY COMPLETELY, BUT INDICATE ONLY THE EDUCATION, TRAINING, AND EXPERIENCE YOU HAVE RECEIVED SINCE YOUR LAST APPLICATION. NOTE: SEE ITEM 14 THERE IS AN EXCEPTION.
 - 25 RENEWAL "X" IF YOU ARE RENEWING CURRENT LICENSE.
 - 2. LPGRADE "X" IF YOU HOLD A RO LICENSE AND ARE NOW APPLYING TO UPGRADE YOUR LICENSE TO A SRO.
 - 24 MULTI-UNIT "X" IF YOU CURRENTLY HOLD A LICENSE AT YOUR FACILITY AND ARE APPLYING TO AMEND YOUR OUR.
 RENT LICENSE TO ADD AN ADDITIONAL UNIT.
 - 2. REAPPLICATION "X" IF YOU HAVE PREVIOUSLY SEEN DENIED A LICENSE AND ARE REAPPLYING.
 - 24 WAIVER REQUESTED "X" THE APPLICABLE WAIVER REQUESTED AND JUSTIFY IN COMMENTS SECTION (ITEM 17).
 - 2.6 DATE PASSED GENERIC FUNDAMENTALS EXAMINATION SECTION (GFES).
 THIS IS NOT APPLICABLE TO RESEARCH REACTORS. ENTER THE MONTH AND YEAR THE GENERIC FUNDAMENTALS EXAMINATION SECTION OF THE WRITTEN EXAMINATION WAS PASSED, IF THE GFES WAS NOT TAKEN, YOU MUST HAVE PASSED AN NRC TION SECTION OF THE WRITTEN EXAMINATION WAS PASSED, IF THE GFES WAS NOT TAKEN, YOU MUST HAVE PASSED AN NRC LICENSING EXAMINATION ON THE APPLICABLE REACTOR TYPE (PWR OR EWR) AFTER PEBRUARY 1, 1982, WHICH LED TO THE LICENSING EXAMINATIONS OR REQUALIFICATION EXAMINATIONS.
- EDUCATION INDICATE BOTH ACADEMIC AND VOCATIONAL/TECHNICAL POST HIGH SCHOOL EDUCATION. FOR MAJOR AREAIS) OF STUDY, INDICATE THE NUMBER OF YEARS SPENT IN EACH COLLEGE CURRICULUM AND THE HIGHEST DEGREE RECEIVED, USING THE DEGREE CODE PROVIDED. FOR VOCATIONAL TECHNICAL EDUCATION, INCLUDE PROGRAMS SUCH AS NUCLEAR POWER SCHOOL, MILITARY TRAINING, AIR CONDITIONING/REFRIGERATION, DIESEL MECHANIC SCHOOL, ETC. INDICATE THE NUMBER OF MONTHS IN EACH PROGRAM AND WHETHER A CERTIFICATE OR DEGREE WAS AWARDED, IF ADDITIONAL SPACE IS NEEDED, CONTINUE UNDER COMMENTS (ITEM 17).
- TRAINING INDICATE THE TRAINING YOU HAVE RECEIVED TO MEET THE REQUIREMENTS OF ANSI N18.1/ANS 3.1. THE BREAKDOWN OF TRAINING IN THIS CATEGORY PARALLELS THE ANS STANDARDS. REFER TO THE STANDARDS IF YOU NEED FURTHER CLARIFICATION. INCLUDE BOTH BEGINNING AND COMPLETION DATES AND THE TOTAL NUMBER OF WEEKS SPENT IN EACH TYPE OF TRAINING. THE NUMBER OF WEEKS IS PROVIDED, IN ADDITION TO SEGINNING AND COMPLETION DATES, IN EACH TYPE OF TRAINING IPON EXAMPLE, 4 WEEKS OF CLASSROOM TRAINING SPREAD OVER A 2-MONTH TO ACCOUNT FOR INTERMITTENT TRAINING IPON EXAMPLE, 4 WEEKS OF CLASSROOM TRAINING SPREAD OVER A 2-MONTH PERIOD), THEREFORE, THE DATE COLUMNS MAY INDICATE A LARGER TIME SPAN THAN THE ACTUAL NUMBER OF WEEKS SPENT IN FULL-TIME TRAINING, TIME IN TRAINING FOR THE LICENSE APPLIED FOR CANNOT BE DOUBLE COUNTED UNDER EXPERIENCE (ITEM 13).
 - ALL REQUALIFICATION TRAINING TIME IS TO BE ACCOUNTED FOR IN THE REQUALIFICATION ITEM. PLEASE DO NOT "DOUBLE LIST" THE TIME SPENT IN REQUALIFICATION TRAINING UNDER ITEM 12.8, REQUALIFICATION, EVEN THOUGH IT MAY INCLUDE CLASSROOM OR SIMULATOR TIME.
- EXPERIENCE A MINIMUM OF & MONTHS AT THE SITE FOR WHICH THE LICENSE IS SOUGHT IS REQUIRED, FOR EACH POSITION HELD, COMPLETE ITEM 18. DO NOT DOUBLE COUNT TIME, IF YOU HAD OVERLAPPING DUTIES, THE MONTHS SHOULD REFLECT THE PROPORTIONATE AMOUNT OF TIME YOU WERE ASSIGNED TO THOSE PARTICULAR DUTIES. IN NO CASE SHOULD THE NUMBER OF MONTHS REPORTED FOR A PARTICULAR TIME PERIOD EXCEED THE NUMBER OF MONTHS THAT ARE IN THAT TIME PERIOD.
- PACILITY OPERATOR TRAINING PROGRAM INDICATE & GRADUATE OF INPO ACCREDITED OPERATOR TRAINING PROGRAM;
 AND & CERTIFIED (ON NRC FORM 474) OR NRC APPROVED SIMULATION FADILITY IS USED IN THE OPERATOR TRAINING PROGRAM, IF "YES" IS CHECKED IN BOTH ITEMS 143 AND 143, EHEN ITEMS 11 (EDUCATION), 12 (TRAINING), 13 (EXPERIENCE)
 AND 16 (EXPERIENCE DETAILS) DO NOT HAVE TO SE DOCUMENTED. NEW APPLICATIONS MUST STILL (INCLUDE THE NUMBER
 OF SIGNIFICANT CONTROL MANIPULATIONS UNDER ITEM 123, NOTE: INFO GCCREDITED MEANS ACCREDITATION BY THE
 NATIONAL NUCLEAR ACCREDITING BOARD AND MEANS THAT AT LEAST THE MINIMUM REQUIREMENTS OF REGULATORY
 GUIDE 13, REV, 2, ARE MET.
- 18. POR RENEWALS ONLY -- (1) ENTER THE APPROXIMATE NUMBER OF HOURS SINCE PREVIOUS RENEWAL OR ISSUANCE OF LICENSE IF FIRST RENEWAL (2) ENTER DATE AND RESULT OF MOST RECENT MRC ADMINISTERED REQUALIFICATION EXAMINATION.
- SE EXPERIENCE DETAILS INCLUDE POSITION TITLE, TIME PERIOD-ROMTO, RACILITY, AND A BRIEF DESCRIPTION OF DUTIES PERFORMED WHILE SERVING IN THAT POSITION. AF MORE SPACE AS NEEDED, USE COMMENTS (ITEM 17), OR AF NECESSARY, ATTACH ADDITIONAL INFORMATION.
- ST. COMMENTS USE THIS SPACE TO INCLUDE ANY EXTRA INFORMATION OR CLARIFICATION FOR OTHER ITEMS ON THE APPLICA-CATION FORM. IF THE SPACE PROVIDED IS NOT SUFFICIENT, YOU MAY ATTACH EXTRA INFORMATION WITH YOUR APPLICA-TION.
- TR. WIRC PORM SEE, CERTIFICATION OF MEDICAL EXAMINATION BY PRETLITY LICENSEE MUST ACCOMPANY THIS APPLICATION.
- SE SIGNATURES SIGN AND DATE ITEM ISA. OSTAIN YOUR TRAINING GOODDINATOR'S BIGNATURE AND THAT OF YOUR SENIOR MANAGEMENT REPRESENTATIVE ON SITE.
- BETACH THESE INSTRUCTIONS AND SUBMIT THE COMPLETED NRC PORMS 300 IDRIBINAL AND TWO COPIES SACH) TO THE APPRO-

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E. TYPE OF LIC	CENSE APPLIED FOR				6. PREVIOUS LIC	ENSE(S) HELD			
- OPERATOR		. DOOK ST	NUMBER	AD 890	& LICENSS NUMBER	BONTH FAT TA	& FACILI	TY DOOKE	TNUMBER
& SENIOR OPERATO		66-					80-		TOAT T
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	AST APPLICATION - SEE INST	RUCTIONS			13. EXPERIENCE (DO NOT D	OUBLE COUNT - SEE II	NSTRUCTION	\$)	
	(Face)	AMONTHA	NO YEAR	* NAME !	NAVY		- HONY	ND VIAR	-
1 - NUCLEAR POWER P	LANT FUNDAMENTALS				1 · AO				
2 -PLANT SYSTEMS CLASSROOM					2 - EDOW/PPWO		-		-
OBSERVATION				District Co.	4 - ERS/ORW				
3- OPERATING PRACTI	CE ERATIONS ON SHIFT				S-OTHER				
SIMULATOR OPERA	TING (Inches Common)				POSSIL	ſ	Ros	1	
SIMULATOR NAMES					9 - GPERATOR 7 - SUPERVISOR		U.N.		-
<u> </u>					B - PLANT STAFF				
NOTE THE REAL PROPERTY.	YES NO				O - OTHER (Same)				
					COMMERCIAL NUCLEAR MA	The state of the s	'		
6 - SRO INSTRUCTION	IFT IN CONTROL ROOM	-			10 - REACTOR OPERATO	MARKET WHEN PROPERTY AND ADDRESS OF THE PARTY.	-		1
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RC FORM 204 C CPR 86.22 86.21

U.S. NUCLEAR REQULATORY COMMISSION

CERTIFICATION OF MEDICAL EXAMINATION BY FACILITY LICENSEE

NAME OF APPLICANT			
FACILITY			PACILITY DOCKET NUMBER
		A. MEDICAL EXAMINATION CERTIFICATION	
THIS IS TO CERTIFY THA	T THE ABOVE NAMED A	PPLICANT FOR AN OPERATOR/SENIOR OPERATOR LICE!	ISE HAS BEEN EXAMINED BY A PHYSICIAN.
PRINTED NAME OF PRINTE	(an)	STATE AND LICENSE NUMBER	EXAMINATION DATE
APPLICANTS PHYSICAL I AND BAFETY I CERTIFY POLLOWED AND THAT DE	CONDITION AND GENER THAT IN REACHING THI DOUMENTATION IS AVA	INCLUDING INFORMATION PURNISHED BY THE APPLIC AL HEALTH ARE NOT SUCH THAT IT MIGHT CAUSE OPEN IE DETERMINATION, THE GUIDANCE CONTAINED IN ANS ILLABLE FOR REVIEW BY NRC.	TATIONAL ERRORS ENDANGERING PUBLIC HEALTH I/ANS 3.4-1083, OR ANSI/ANS 18.4-1977 (N380) WAS
ON THE BASIS OF THE RE	COMMENDATION OF TH	ie Physician, I recommend that the applicant's of	ERATOR LICENSE BE CONDITIONED AS
1. NO RESTRICTION	The same of the sa		
		RFORMING LICENSED DUTIES	
THE RESERVE THE PERSON NAMED IN	WORN WHEN PERFORM		
		revide details below and attach supporting medical evidence for f	
CONTRACTOR OF THE PERSON NAMED IN COLUMN 2	MARKATAN PROPERTY WASHINGTON TO A STATE OF THE PARTY OF T	BUBMITTAL-Arounde details below and artists supporting medi	sel evidence for NRC review.
PROPOSED WORDING OF			
RELATIONSHIP OF RESTR	ICTION TO DISCUALIFY	FING CONDITION (Briefly indicate now regression will correct	the elecutifying conviction?
REMARKS FOR RESTRICT	ION CHANGE /Bleet & CO	0.00	
		E. NONMEDICAL GERTIFICATION	
POWER REACTORS	THIS CARTIFIES THE	TTHE APPLICANT HAS BEEN FOUND TO MEET THE SAFE	GUARDS' AND FITNESS FOR DUTY
	REQUIREMENTS OF	THIS FACILITY FOR LIGENSED OFFRATORS	
NON-POWER REACTORS.		T THE APPLICANT HAS BEEN FOUND TO MEET THE SAFE	
	FOR LICENSED OPER	NATORS, AND I HAVE NO KNOWLEDGE OF THE APPLICAN IRSTANCES AS ESTABLISHED PUREUANT TO 10 CFR 26.	T EXCEEDING THE CUTOFF LEVELS FOR ALCOHOL
	ON CONTROLLED BU	SESTANCES AS ESTABLISHED FOREDARY TO 10 CFR 26.	
ANY FALSE STATEMENT OF	MISSION IN THIS DOCUME	NT INCLUDING ATTACHMENTS MAY BE BUBLECT TO CIVIL AND AND ATTACHMENTS IS TRUE AND CORRECT.	CRIMINAL SANCTIONS I DERVIEW UNDER PENALTY DE
NAME AND ADDRESS OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY.	Name and Add Division of the Owner, where the Party of the Owner, where the Party of the Owner, where the Party of the Owner, where the Owner, which the Owner, where the Owner, which the Owner,	the supposed and the supposed by the supposed	The state of the properties resonance with despendent and said and place of the said and said and said and said
PRINTED NAME AND SIGN	ATURE (Smer name)	on Aspresanterio on Shot TITLE	DATE
In economiste with 10 CFR 5	5.5, Communications, this	form shall be submitted to the NRC as tollows: BY MAIL ADD	RESSED TO:
Remente Asministrator, A	min I	Resional Administrator, Region II	Regional Administrator, Region III
U.S. Nucies! Requistory C	ammission .	U.S. Nuclear Regulatory Commission	U.S. Nuclear Regulatory Commission 700 Recovers Ress
475 Allendon Rood King of Prusia, PA 19406		101 Marierta Streen, Suita 2100 Asiento, GA 20223	Gien Ellyn, IL 60137
			1
Regional Administrator, Ri U.S. Nuclear Regulatory G 611 Riven Plaza Drive, Sun Artinaton, TX 78011	OTH MINE	Accional Administrator, Region V U.S. Nuclear Regulatory Commission 1480 Marie Lane, Suite 210 Waltest Crean, CA Sales	At I

PRIVAC / Public Law 63-676), the following statement of surfaces and reference Adi of 1974 (Public Law 63-676), the following statement of surfaces a individual same subserv information to the U.S. Nuclear Regulatory Commission on NRC Form 396. This information is maintained in a review of reserval designates as NRC-18 and constrained as 61 Passers Register 33167 (September 18, 1986).

AUTHORITY: Sections 107 and 181(1) of the Asomic Energy Adt of 1964, as amonases 42 U.S.C. 2137 and 2201(1)).

PRINCEPAL, PURPOSE(S): Information entered on this form is used to determine oriented the physical condition and general registre of the applicant are such that they will not come approximate errors encoraging public health and setter. This information may as used by the NRC staff to determine if the inconstant matter the requirements of 10 CFR 56 to take an examination or to be issued an experience is lighted.

ACT STATEMENT

ROUTINE USES: The information may be displaced to an expropriate Powers, State, or local agency in the event the information indicates a violation or secential violation of level and in the event the information indicates a violation or potential violation of level and in the event the information indicates a violation or potential violation of the and in the event to someoperate Powers, State, and loop agency to the extent relevant and represent for a NRC decision about you.

RYMETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INPORMATION, Disclosure is soluntary. If the required information is not provided, nowever, the application for a facility operator's or senior expectator's license may be denied.

EYETEM MANAGER(SI AND ADDRESS: Chief, Operator Licensing Brone), Office of Nuclear Register Regulation, U.S. Nuclear Regulatory Commission, Washington, OC 20568.

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SCHMARY OF CHANGES TO NEC FORM 396

Medical Examination Ourtification -

Added block "Restriction Change From Previous Submittal" plus Remarks

Non-Medical Certification

DRAFT

- Changed non-medical certification statement to: Power Reactors-This certifies that the applicant has been found to meet the safeguards' and fitness for duty requirements of this this facility for licensed operators. Nonpower-This certifies that the applicant has been found to meet the safeguards' requirements of this facility for licensed operators and I have no knowledge of the applicant exceeding the cutoff levels for alcohol or controlled substances as established pursuant to 10 CFR 26.

URAFT