

069

RELATED CORRESPONDENCE

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November 7, 1984

Anthony Z. Roisman, Esq.
Trial Lawyers for Public Justice
2000 P Street, N.W.
Suite 611
Washington, D.C. 20036

Re: Texas Utilities Electric Co., et al.
(Comanche Peak Steam Electric Station,
Units 1 and 2), Docket Nos. 50-445-2,
50-446-2

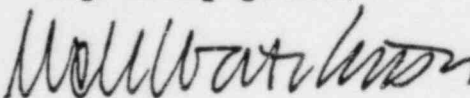
Dear Mr. Roisman:

Pursuant to the Board's order dated November 1, 1984, we enclose copies of the following documents regarding James Cole:

1. Counselling and guidance report dated June 16, 1982.
2. Employee performance and salary review dated August 13, 1982.
3. Counselling and guidance report dated September 14, 1982, with two attached pages.
4. Counselling and guidance report dated October 21, 1982.
5. Termination interview dated October 21, 1982.

A search of the relevant NCR log has disclosed no NCRs written by Mr. Cole in the week before his termination.

Very truly yours,



McNeill Watkins II
Counsel for Texas Utilities
Electric Co., et al.

8411130249 841107
PDR ADOCK 05000445
G PDR

Enc
cc: Service List

DS03

Counselling and Guidance Report

Employee's Name Jim Cole
Emp. # B. 798 Dept. # Q.C.

I. Reason for conference (check one):

- | | | | |
|----------------|---------------|------------------------|---------------|
| 1. Attendance | <u> </u> | 5. Work Performance | <u> </u> |
| 2. Attitude | <u> </u> | 6. Working with others | <u> </u> |
| 3. Punctuality | <u> </u> | 7. | <u> </u> |
| 4. Other | <u>X</u> | | |

II. Statement of what occurred and problem it has created, or could create:

While WORKING NITE SHIFT - 6:30PM to 7:00AM, JUNE 14, 1982
JIM WAS AWAKENED BY FELLOW EMPLOYEE ARRIVING TO
WORK ON DAY SHIFT AT 6:00 AM.

III. Recommendations:

REARRANGE HOME LIFE TO ALLOW MORE TIME FOR SLEEP.
THERE WILL BE NO NEXT TIME.

IV. Employee's Comments:

ACKNOWLEDGED, THERE WILL NOT BE A
RECURRENCE.

Employee's signature James W. Cole

Date of Conference 6/16/82

Counselor's signature Richard Plouffe

Distribution: Original - Personnel Dept. employee's file



EMPLOYEE PERFORMANCE AND SALARY REVIEW
POWER DIVISION

EMPLOYEE NAME: Jim Cole DATE: 8-13-82
 CURRENT JOB CLASSIFICATION: Nuclear QC Inspector B EMPLOYEE ANNIVERSARY DATE: 5-29-79 CREDITED SERVICE: 3 yr. 3 mo.
 TOTAL YEARS JOB RELATED EXPERIENCE: 4 + years DATE OF BIRTH: 12-5-58

EDUCATION beyond High School? YES NO If YES but no degree, number of years 1 area of study Electrical Engr. Tech.

If degree obtained, complete below:

(DEGREE)	(MAJOR)	(DATE GRADUATED)	Professional Engineer? <input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Associate			Other Professional Registrations or Licenses (SPECIFY NAME AND DATE OBTAINED)
<input type="checkbox"/> Bachelor			
<input type="checkbox"/> Master			
<input type="checkbox"/> Other			
Specify			

Specify any additional schooling completed or in progress _____

PERFORMANCE CATEGORY

PERFORMANCE CATEGORY	BELOW AVERAGE	AVERAGE	OUTSTANDING	EXCEPTIONAL
LEADERSHIP/POTENTIAL Guiding, Directing, Motivating Others - Setting a good example, Developing Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PRODUCTIVITY/RESULTS Quantity and Quality of work - Achievement of goals in a timely manner	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INITIATIVE/MOTIVATION Working without direction, Problem solving, Self-development	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JOB KNOWLEDGE Technical/Professional capabilities and Competence	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADMINISTRATIVE ABILITY Planning, Organizing and Controlling, Assurances of Responsibility, Decision Making, Judgment, Cost Control	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WORK HABITS Attendance, Punctuality, Work Behavior, Attitude	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONSIDERING JOB RELATED FACTORS ONLY, WHAT IS YOUR OVERALL ASSESSMENT OF THE EMPLOYEE'S PRESENT ABILITY AND CONTRIBUTION TO YOUR OPERATION, IN RELATION TO OTHER COMPARABLE EMPLOYEES.

BELOW AVERAGE AVERAGE OUTSTANDING EXCEPTIONAL

If additional information or comments are required attach separate page.

SALARY INCREASE RECOMMENDATION - Explain why a salary increase and/or classification change is warranted.

Mr. Cole has recently acquired the necessary certifications to qualify as an A inspector. Therefore, I would like to recommend him for a job reclassification and pay increase.

DEPARTMENT/PROJECT APPROVALS:

Supervisor: [Signature]
 Manager: [Signature]

DIVISION APPROVALS:

Counselling and Guidance Report

Employee's Name Jim Cole
Emp. # B798 Dept. # QC

I. Reason for conference (check one):

- | | | | |
|----------------|-------------------------------------|------------------------|--------------------------|
| 1. Attendance | <input checked="" type="checkbox"/> | 5. Work Performance | <input type="checkbox"/> |
| 2. Attitude | <input type="checkbox"/> | 6. Working with others | <input type="checkbox"/> |
| 3. Punctuality | <input type="checkbox"/> | 7. | <input type="checkbox"/> |
| 4. Other | <input type="checkbox"/> | | |

II. Statement of what occurred and problem it has created, or could create:

Late for work + unexcused absence

III. Recommendations:

30 days probation if ~~late~~ late will result in termination

IV. Employee's Comments:

I will try very hard to make a better effort to be timely and to be here when required and if I fall short due to things outside the job than so be it

Employee's signature James W. Cole

Date of Conference 9-14-82

Counselor's signature [Signature]

Distribution: Original - Personnel Dept. employee's file

6-16-82

Jan. 27th 86

Feb. 1st 86
24th 86

April 15th late
29th 86

May 10th 86
27th - 31st vacation

June 1-5 vacation
7th 5 left early
15th 86

July 7th 3 late
8th 1/2 left early
13th 1/2 left early

Aug. 2nd 1/2 left early
3rd 86
4th 2 left early
25th 86
31st 1/2 left early

PC

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refused

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job than so be

Date of Conference 4-14-82

Counselor's signature [Signature]

Distribution: Original - Personnel Dept. employee's file

Sept 2nd 12 late

9-14-82 1 hr late PH

9-14-82

C
C

Counselling and Guidance Report

Employee's Name Jim Cole
Emp. # B798 Dept. # OC

I. Reason for conference (check one):

- | | | | |
|----------------|--------------------------|------------------------|-------------------------------------|
| 1. Attendance | <input type="checkbox"/> | 5. Work Performance | <input checked="" type="checkbox"/> |
| 2. Attitude | <input type="checkbox"/> | 6. Working with others | <input type="checkbox"/> |
| 3. Punctuality | <input type="checkbox"/> | 7. | <input type="checkbox"/> |
| 4. Other | <input type="checkbox"/> | | |

II. Statement of what occurred and problem it has created, or could create:

Numerous errors concerning hanger documentation have surfaced during O.R.G.'s review and hanger engineering has also brought to my attention additional errors made by Mr. Cole of which he had been verbally warned about on numerous occasions.
(Slow paperwork flow + bottle neck our N-5 program)

III. Recommendations:

Termination

IV. Employee's Comments:

I tried to do my job to the company's satisfaction, but fell short. I sincerely hope that this case & problems against me will not hamper my being employed in the industry elsewhere.

Employee's signature James W. Cole

Date of Conference 10-21-82

Counselor's signature J. Phaver

Distribution: Original - Personnel Dept. employee's file

COMPANY NAME: *Brown & Root Inc.*

DATE OF HIRE <i>5-27-79</i>	SOCIAL SECURITY NO. <i>449-15-6933</i>	LAST NAME <i>Cole</i>	FIRST <i>James</i>	MIDDLE <i>W.</i>	JR. SR. ETC.
--------------------------------	---	--------------------------	-----------------------	---------------------	--------------

<i>12-5-58</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>S</i>	<i>00</i>
<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Buffalo</i>		<i>Eric</i>				<i>NY</i>	

CO. CODE <i>101</i>	STATE CODE <i>01</i>	PAYROLL JOB NO. <i>35-1195</i>	SIST. CODE	PAYROLL PERIOD Wk <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	FOREMAN NO. <i>076</i>	SADGE NO. <i>B798</i>	STATE TAX CLASS	STATUS	ALLOWANCE	RES.
------------------------	-------------------------	-----------------------------------	------------	--	---------------------------	--------------------------	-----------------	--------	-----------	------

QC Insp A *6374* *090* *5.00* *X* *2*
X *5373* *1435*
Glen Rose, Tx
Mathis

NEW PERMANENT MAILING ADDRESS <i>221 E. WILSON</i> <i>CLEBURNE</i>	CITY <i>CLEBURNE</i>	STATE <i>TX.</i>	ZIP CODE <i>76031</i>
--	-------------------------	---------------------	--------------------------

NEW PERMANENT TELEPHONE NO. <i>1030A</i>	A.C. NO.
---	----------

LAST DAY WORKED <i>10-24-82</i>	EXTENDED PAY PAID THRU	PERFORMANCE RATING	BEL <input type="checkbox"/>	GOOD <input type="checkbox"/>	FAIR <input checked="" type="checkbox"/>	POOR <input type="checkbox"/>
------------------------------------	------------------------	--------------------	------------------------------	-------------------------------	--	-------------------------------

[Handwritten signature]

REASON FOR TERMINATION - CHECK ONE BELOW

(02) REDUCTION OF FORCE	(19) TO CLEAR PREPRINT ONLY	(47) RETURN TO SCHOOL	(76) WALKED OFF JOB	(82) EXCESSIVE ABSENCE
(04) DECEASED	(41) POOR HEALTH	(71) FAILURE TO REPORT	(77) LOAFING ON JOB	(85) REFUSED TO DO ASSIGNED WORK
(05) RETIRED	(42) MOVING AWAY	(72) FAILURE TO RETURN	(78) SLEEPING ON JOB	(90) ALCOHOL RELATED*
(09) FAILURE TO WORK DURING POSSIBLE LABOR DISPUTE REASON & STATUS UNDETERMINED	(43) ILLNESS IN FAMILY	(73) FIGHTING ON JOB	(79) FAILURE TO OBEY SAFETY INSTRUCTIONS	(1) NARCOTICS RELATED*
(15) REFERRED TO JOB NO.	(44) TO WORK ELSEWHERE	(74) INSUBORDINATION	(80) FAILURE TO OBEY INSTRUCTIONS	(12) SECURITY/THEFT*
(16) JOB/TASK COMPLETED	(45) DID NOT LIKE SUPERVISOR	<input checked="" type="checkbox"/> NOT CAPABLE OF (75) PERFORMING ASSIGNED WORK	(81) NEGLIGENCE	(99) OTHER*

*ITEMS REQUIRE EXPLANATION AND PROJECT MANAGERS SIGNATURE:

Ref. counseling & guidance reports in James personnel file

I AGREE THAT THE REASON CHECKED ABOVE IS THE TRUE REASON FOR TERMINATION OF MY EMPLOYMENT.

EMPLOYEE SIGNATURE *James W. Cole*

IMMEDIATE SUPERVISOR SIGNATURE *[Signature]* DATE *10-21-82*

(COPY FURNISHED EMPLOYEE) NO YES

UNITED STATES OF AMERICA
NUCLEAR REGULATORY COMMISSION

BEFORE THE ATOMIC SAFETY AND LICENSING BOARD

In the Matter of)
)
TEXAS UTILITIES ELECTRIC) Docket Nos. 50-445-2 and
COMPANY, et al.) 50-446-2
)
(Comanche Peak Steam Electric) (Application for
Station, Units 1 and 2)) Operating Licenses)

CERTIFICATE OF SERVICE

I hereby certify that copies of the foregoing document in the above-captioned matter was served upon the following persons by hand-delivery,* or deposit in the United States mail,** first class, postage prepaid, this 7th day of November, 1984:

**Peter B. Bloch, Esq.
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U.S. Nuclear Regulatory
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Washington, D.C. 20555

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**Herbert Grossman, Esq.
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Washington, D.C. 20555

**Mr. John Collins
Regional Administrator
Region IV
U.S. Nuclear Regulatory
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Arlington, Texas 76011

**Chairman, Atomic Safety and
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Washington, D.C. 20555

**Mr. William L. Clements
Docketing & Services Branch
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**Stuart A. Treby, Esq.
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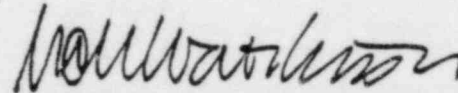
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McNeill Watkins II

cc: Homer C. Schmidt
John W. Beck
Robert Wooldridge, Esq.