



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
WASHINGTON, D.C. 20555-0001

September 16, 2016

ALL AGREEMENT STATES, VERMONT, WYOMING

NOTIFICATION OF NEW TRAINING APPLICATION FOR COURSE FORM ON AGREEMENT  
STATE WEBSITE (STC-16-074)

**Purpose:** To provide notification of the new application for the training course form to be used by the Agreement States.

**Background:** It was determined that additional information was needed on the application. The revised form will facilitate quicker processing.

**Discussion:** Effective immediately, Agreement State applicants requesting NRC-provided training should use the new Training Application Form. The new form can be found at the NRC Sponsored Training for Agreement State Staff webpage under the Training and Travel Forms web link at [https://scp.nrc.gov/special/application\\_for\\_training\\_course.docx](https://scp.nrc.gov/special/application_for_training_course.docx). An example is also enclosed.

If you have any questions regarding this correspondence, please contact Paul Michalak at (301) 415-5804 or the individual name below:

POINT OF CONTACT: Sandra E. Rodriguez  
TELEPHONE: (301) 415-5441

*/RA/  
PMichalak for DCollins*

Daniel S. Collins, Director  
Division of Materials Safety, State, Tribal  
and Rulemaking Programs  
Office of Nuclear Material Safety  
and Safeguards

Enclosure:  
Training Application Form

**NRC SPONSORED TRAINING FOR AGREEMENT STATE STAFF  
APPLICATION FOR TRAINING COURSE/WORKSHOP**

Please complete and return to: [Astrainingandtravel.Resource@nrc.gov](mailto:Astrainingandtravel.Resource@nrc.gov).

If you have any questions or comments about this form, please contact Marcia Casby at 301-415-6525

<b>SECTION I TO BE COMPLETED BY APPLICANT</b>	
Name: <a href="#">Click here to enter text.</a>	STATE: <a href="#">Click here to enter text.</a>
E-Mail Address: <a href="#">Click here to enter text.</a>	U.S. Citizen: Yes <input type="checkbox"/> No <input type="checkbox"/>
Business Phone/Ext: <a href="#">Click here to enter text.</a>	
<b>COURSE/WORKSHOP INFORMATION</b>	
Title of Course/Workshop: <a href="#">Click here to enter text.</a>	
Course Number: <a href="#">Click here to enter text.</a>	
Start Date: <a href="#">Click here to enter a date.</a>	End Date: <a href="#">Click here to enter a date.</a>
<b>QUALIFICATIONS</b>	
Currently qualified as a RAM Inspector: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Currently qualified as a RAM License Reviewer: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Student is being qualified as a: RAM Inspector <input type="checkbox"/> and/or RAM License Reviewer <input type="checkbox"/>	
Please specify: Medical <input type="checkbox"/> Industrial <input type="checkbox"/> Incident Response for Materials Events <input type="checkbox"/> Academic <input type="checkbox"/> Decommissioning <input type="checkbox"/> Other <a href="#">Click here to enter text.</a>	
Core Courses (Check Prior Training):	Non-Core Courses (Check Prior Training):
G-108 <input type="checkbox"/> G-109 <input type="checkbox"/> G-205 <input type="checkbox"/> H-117 <input type="checkbox"/>	H-111 <input type="checkbox"/> H-115 <input type="checkbox"/> H-119 <input type="checkbox"/> H-121 <input type="checkbox"/>
H-122 <input type="checkbox"/> H-123 <input type="checkbox"/> H-201 <input type="checkbox"/> H-304 <input type="checkbox"/>	H-312 <input type="checkbox"/> H-314* <input type="checkbox"/> H-315* <input type="checkbox"/> H-410 <input type="checkbox"/>
H-305 <input type="checkbox"/> H-308 <input type="checkbox"/> H-313 <input type="checkbox"/> S-201 <input type="checkbox"/>	H-411 <input type="checkbox"/> H-413* <input type="checkbox"/> H-500 <input type="checkbox"/> F-104* <input type="checkbox"/>
<small>*CONSIDERED CORE FOR CERTAIN STATES</small>	
<b>SECTION II TO BE COMPLETED BY THE STATE RADIATION CONTROL PROGRAM DIRECTOR</b>	
Check if applicable:	
1. The State is on heightened oversight or monitoring based on last IMPEP review: <input type="checkbox"/>	
2. The State currently does not have inspection or licensing expertise to maintain current IMPEP performance levels as demonstrated by one or more recent vacancies: <input type="checkbox"/>	
Please indicate the purpose of training:	
Initial Qualification/Core Course: <input type="checkbox"/> (REQUIRED TO QUALIFY THE STUDENT AS A RAM INSPECTOR AND/OR RAM LICENSE REVIEWER)	If submitting more than one application for this course, indicate priority level: Priority: <input type="checkbox"/> of: <input type="checkbox"/> (# of Apps.)
Non-Core Course: <input type="checkbox"/> (NOT REQUIRED FOR INITIAL QUALIFICATION. PRIORITY WILL GENERALLY BE GIVEN TO STUDENTS WHO HAVE COMPLETED A MAJORITY OF CORE COURSES)	
<b>By submitting this application, you acknowledge that the student is currently being trained to be a qualified RAM Inspector and/or RAM Licensing Reviewer.</b>	
Radiation Control Program Director: <a href="#">Click here to enter text.</a>	
Phone #: <a href="#">Click here to enter text.</a>	
SIGNATURE:	

Revised: May 2016

Enclosure