PERSONALLY IDENTIFIABLE INFORMATION - WITHHOLD UNDER 10 CFR 2.390

NRC FORM 398 (MM-YYYY) 10 CFR 55.31, 55.35, 55.47, and 55.57 PERSONAL QUAL	APPROVED BY OMB: NO. 3150-0090 EXPIRES: (MM/DD/YYYY) Estimated burden per response to comply with this mandatory collection request: 2.56 hours. NRC requires this information to ensure that applicants/licensees meet all the requirements for taking reactor operator examinations. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0090), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does																	
TO REMAIN VALII	not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.																	
1. APPLICANT'S FULL NAME	IP Code)		4. TYP	E OF A	PPLICAT	ON (Che	ck applicable l	boxes)									
Mr. Mrs.	a. NEW f. WAIVER REQUESTED (Justify In Item 17)																	
	b. RENEWAL 1 - WRITTEN (Cate																	
	c. UPGRADE 2 - OPERATING (Category																	
	d. MULTI-UNIT (Amend to																	
	e. REAPPLICATION 4 - MEDICAL																	
2. CITIZ			3.	BIRTH [DATE	1 - FIRST DENIAL 5 - OTHER												
		MONTH	DAY	YEAR	g. DATE PASSED GFE													
a. UNITED STATES								3 - THIRD DENI	AL		IM	M YY						
b. OTHER (Specify)								4 - WITHDRAW	AL									
5. TYPE	OF LICE	NSE APPLIE	FOR	·			6. CURRENT OR PREVIOUS LICENSE(S) HELD											
a. OPERATOR (RO)		a. DOCKET NO.		RO	SRO	LSRO	D. LICENSE NUMBER			IRATION DAY	ATION DATE d. FACILIT			Y DOCKET NUMBER				
b. SENIOR OPERATOR	R (SRO)				+	+			WONTH	DAT	TEAR							
c. LIMITED SRO (LSRO)		055-										050-						
7. NAME AND ADDRESS OF	APPLIC	ANT'S EMPLO	YER (Ir	clude .	Zip Code)	10. CURRENT POSITION AT FACILITY											
8. NAME OF APPLICANT'S FACILITY FACILITY DOCKET NUMBER 9. ADDITIONAL FACILITY DOCKETS (Multi-unit Licenses)							a. PLANT SUPERINTENDENT/MANAGER b. ASSISTANT PLANT SUPERINTENDENT/MGR. c. SHIFT SUPERVISOR d. STAFF ENGINEER e. SHIFT TECHNICAL ADVISOR/SHIFT ENGINEER f. INSTRUCTOR g. SENIOR CONTROL ROOM OPERATOR i. AUXILIARY UNIT OPERATOR/ TRAINEE/TURBINE BUILDING/EQUIPMENT OPERATOR (NON-LICENSED OPERATOR) j. OTHER (Specify) J. OTHER (Specify) M. CONTROL ROOM OPERATOR											
						11. E	DUC	CATION										
a. HIGH SCHOOL	HIGH SCHOOL b. COLL						DEGREE CODES C				. VOCATIONAL/TECHNICAL					RTIFICA		
	M.A	JOR AREA(S)	OF STUD	STUDY NUMBER HIGHEST DEGREE				To be used for "HIGHEST DEGREE" obtained)	U. VOU	. VOCATIONAL/TECHNICAL					RECEIVE			
GRADUATE					OF YEARS	(Use Codes		0 - NONE 1 - CERTIFICATE	TYPE OF TRAINING						YE	ES NO		
GED EQUIVALENCY	ENGINEERING							2 - ASSOCIATE 3 - BACHELOR										
NO OTHER								4 - MASTER 5 - DOCTORAL										
			12	. POV	VER REA	CTOR OF	PER	ATOR TRAINING PRO	GRAM									
a. HAS THE APPLICANT COMPL TRAINING PROGRAM ACCRE NATIONAL NUCLEAR ACCRE	DITED BY	THE	Y	'ES	N	10		b. IS A "PLANT-REFERE (AS DEFINED IN 10 CI OPERATOR TRAINING	FR 55.4)	USED IN T		YES		NO				
13. TRAINING	(Since La	ast Application	- See In	structio	ns)			14.	SIGNIFI	CANT CO	NTROL I	MANIPULATIO	NS					
a. CLASSROOM MC FRO					YEAR TO	NUMBER OF WEEKS	DESCRIPTION								NT SIMULATOR			
1 NUCLEAR POWER PLANT FUNDAMENTALS							a.											
2 PLANT SYSTEMS							b.											
3 PLANT PROCEDURES							c.								[
b. SIMULATOR							d.									<u>_</u>		
C. SRO INSTRUCTION d. EXTRA PERSON ON SHIFT IN CONTROL ROOM				\perp			e.							<u> </u>	[
d. EXTRA PERSON ON SHIFT IN CONTROL ROOM							f.						_	<u> </u>		<u></u>		
e. TIME ON SHIFT ABOVE 20% POWER							g.						_	<u> </u>	L	<u></u>		
f. REQUALIFICATION							h.							<u> </u>	ا	<u></u>		
g. OTHER (Specify)							i.							<u> </u>	[4		

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	ENCE DETAILS														
POSITION TITE	LE FROI	FROM DATE TO DATE MONTHS					ACILITY	DUTIES							
			DATE		RE	SULT									
a. HOURS OPERATED	TE AND RESULT O	ENSIVE	W			PASS		FAIL							
		> 10	000 (MORE 1	HAN)			QUALIFICATION E NUAL OPERATING		0			PASS		FAIL	
18 NPC FORM 396 CERTIFICATION OF MEDICAL EVAMINATION BY FACULTY LICENSEE IS ATTACHED															
18. NRC FORM 396, CERTIFICATION OF MEDICAL EXAMINATION BY FACILITY LICENSEE, IS ATTACHED 19. SIGNATURES															
ANY FALSE STATEMENT OR OMISSION IN THIS DOCUMENT, INCLUDING ATTACHMENTS, MAY BE SUBJECT TO CIVIL AND CRIMINAL SANCTIONS.															
19a. I certify under penalty of perjury that the information in this document and attachments is true and correct in accordance with the instructions. 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 instance 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. I also authorize the NRC to submit the results of examinations to my employers for use in preparing retraining programs, as necessary.															
at a nuclear facility. I also authorize the NRC to submit the results of examinations to my employers for use in preparing retraining programs, as necessary. SIGNATURE - APPLICANT DATE															
CHECK APPLICABLE BOX FOR TYPE OF APPLICATION (i.e., check (b) if item 4.a, 4.c, 4.d, or 4.e is checked; check (c) if item 4.b, "RENEWAL," applies) b. I certify that: (1) the above named individual has successfully completed the facility licensee's requirements to be licensed as an Operator/Senior Operator pursuant to Title 10, Code of Federal Regulations, Part 55; (2) the individual has a need for an Operator/Senior Operator license to perform his/her assigned duties; and (3) the facility will be made available for the examination. I also certify under penalty of perjury that the information in this document and attachments is true and correct in accordance with the instructions. c. I certify that the above named individual completed the approved requalification program (with the exceptions noted in Item 17) required by section 50.54(i-1) of 10 CFR 50, and that he/she has discharged his/her licensed responsibilities competently and safely. I also certify under penalty of perjury that the information in this document and attachments is true and correct.															
TRAINING COORDINATOR SENIOR MANAGEMENT REPRESENTATIVE ON SITE															
PRINTED OR TYPED NAME AND TITLE PRINTED OR TYPED NAME AND TITLE															
SIGNATURE	SIGNATURE					DATE									
FOR NRC USE															
WAIVER (Check or Col	mplete items, as	MEETS REQ	UIREMENTS	DO	ES NOT ME	EET REQUI	REMENTS (A	Explai	n below)						
CATEGORY	GRANTE HEADQUARTERS	D BY REGIOI	N HEAD	DENIED QUARTERS		GION									
WRITTEN		T.L.GIOI	TILAD	QJ/II(ILII()	INE	.01014	1								
OPERATING]								
ELIGIBILITY															
MEDICAL OTHER							SIGNATURE					DATE			
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INSTRUCTIONS FOR COMPLETING NRC FORM 398, PERSONAL QUALIFICATION STATEMENT--LICENSEE

You must complete items 1-10, 18, and 19, plus changes since your last application, and other items as specified below. For additional guidance refer to NUREG-1021, "Operator Licensing Examination Standards for Power Reactors," or NUREG-1478, "Non-Power Reactor Operator Licensing Examiner Standards."

4. TYPE OF APPLICATION

- a. NEW "X" if you are a new applicant at this facility. Complete items 11-15 (10 CFR 55.31).
- **b. RENEWAL -** "X" if you are renewing a current license. Complete items 12, 13.f, and 16 (10 CFR 55.57); if items 12.a and 12.b are checked "YES," then item 13.f does not have to be completed.
- **c. UPGRADE -** "X" if you hold an RO license and are applying to upgrade your license to an SRO at the same facility. Complete items 12, 13, and 15 relevant to the SRO upgrade.
- **d. MULTI-UNIT -** "X" if you hold a license at your facility and are applying to amend your current license to add an additional unit. Complete item 13 as it applies to unit differences.
- e. REAPPLICATION "X" if you have previously been denied a license. Indicate whether you are reapplying after a first denial, second denial, or third denial. Describe, in detail, in items 13 and 17, the additional training completed since the last denial (10 CFR 55.35). If you previously withdrew an application, check item 4.e.4 and complete items 11-15.
- **f. WAIVER REQUESTED** "X" the applicable waiver requested and explain/justify in detail in item 17 (10 CFR 55.47). Refer to NUREG-1021 or -1478, as applicable, for additional guidance.
- g. DATE PASSED GENERIC FUNDAMENTALS EXAMINATION (GFE) This is not applicable to research and test reactors or licenses limited to fuel handling (item 5.c), renewal or upgrade applications (items 4.b & c). Enter the month and year you passed the GFE for the type of facility (BWR/PWR) identified in item 8. If you have not passed the GFE, explain in item 17.
- 11. **EDUCATION** For college, enter the major area(s) of study, the number of years spent in each major area of study and the highest degree obtained (using the degree codes listed on the form). For vocational/technical, enter the number of months for each type of training and whether a certificate was awarded. If additional space is needed, use item 17.
- 12. POWER REACTOR OPERATOR TRAINING PROGRAM Check the appropriate box in items 12.a and 12.b.
 - Checking "YES" in item 12.a indicates that you have completed a SAT-based training program that is accredited by the National Nuclear Accrediting Board and meets the education and experience requirements outlined by the National Academy for Nuclear Training in its current guidelines for initial training and qualification of licensed operators.
 - If "YES" is checked in both items 12.a and 12.b then items 13 and 15 do not have to be completed with the following
 exceptions: (1) certified instructors seeking an SRO license must complete item 15; (2) any exceptions or waivers from the
 education and experience requirements outlined by the National Academy for Nuclear Training must be explained in item 17.
- **13. TRAINING -** All requalification training time is to be accounted for in item 13.f (unless items 12.a and 12.b are checked "YES"). Do not "double list" the time spent in requalification training for classroom or simulator time under items 13.a or 13.b.
- 14. SIGNIFICANT CONTROL MANIPULATIONS If you are a new applicant (item 4.a), you must provide evidence that you have successfully manipulated the controls of the facility for which a license is sought. Describe (date, time, type, and magnitude) at least five significant control manipulations that affect reactivity or power level and whether the manipulations were performed in the plant or on the simulator (10 CFR 55.31(a)(5), 10 CFR 55.46(c)).
- 15. EXPERIENCE DETAILS For each position held, provide position title, time in position (from/to and number of months), facility, and a description of duties performed while in that position. Do not double count time. If you had overlapping duties, the time should reflect the amount of time you were assigned to those particular duties. In no case should the number of months reported exceed the number of months that are in that time period. If more space is needed, use item 17 or attach additional information.
- **16. FOR RENEWALS ONLY -** (a) Check the box that most accurately reflects your approximate number of operating hours since previous renewal or issuance of license if first renewal. (b) Enter the date and results of your most recent comprehensive written regualification examination and annual operating test (10 CFR 55.57).
- 17. **COMMENTS** Use this space to include any extra information or clarification for other items on the application form. If the space provided is not sufficient, you may attach extra information with your application.
- 18. NRC FORM 396, CERTIFICATION OF MEDICAL EXAMINATION BY FACILITY LICENSEE, IS ATTACHED NRC Form 396 must accompany this application unless a waiver of the medical examination is being requested in item 4.f.4 (10 CFR 55.23).
- 19. SIGNATURES You must sign and date item 19.a. Obtain signatures of your training coordinator and your senior management representative on site and have them check block 19.b or 19.c, as directed (10 CFR 55.31, 10 CFR 55.57).

Detach these instructions and submit the completed original NRC Forms 398 and 396 to the appropriate address. (See reverse side for addresses and for the Privacy Act Statement.)

ADDRESSES

In accordance with 10 CFR 55.5, Communications, this form shall be submitted to the appropriate NRC office by mail addressed to:

REGIONAL ADMINISTRATOR, REGION I U.S. NUCLEAR REGULATORY COMMISSION 2100 RENAISSANCE BOULEVARD, SUITE 100 KING OF PRUSSIA, PA 19406-2713

REGIONAL ADMINISTRATOR, REGION III U.S. NUCLEAR REGULATORY COMMISSION 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60532-4352

U.S. NUCLEAR REGULATORY COMMISSION
OPERATOR LICENSING AND TRAINING BRANCH
DIVISION OF INSPECTION AND REGIONAL SUPPORT
OFFICE OF NUCLEAR REACTOR REGULATION
WASHINGTON, DC 20555-0001

REGIONAL ADMINISTRATOR, REGION II U.S. NUCLEAR REGULATORY COMMISSION 245 PEACHTREE CENTER AVENUE, NE., SUITE 1200 ATLANTA, GA 30303-1257

REGIONAL ADMINISTRATOR, REGION IV U.S. NUCLEAR REGULATORY COMMISSION 1600 E. LAMAR BOULEVARD ARLINGTON, TX 76011-4125

RESEARCH AND TEST REACTORS

U.S. NUCLEAR REGULATORY COMMISSION RESEARCH AND TEST REACTORS OVERSIGHT BRANCH DIVISION OF POLICY AND RULEMAKING OFFICE OF NUCLEAR REACTOR REGULATION WASHINGTON, DC 20555-0001

PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. 552(e)(3), enacted into law by Section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the Nuclear Regulatory Commission (NRC) on NRC Form 398. This information is maintained as part of a system of records designated as NRC-16, described at 74 FR 585 (January 6, 2009), or the most recent Federal Register publication of the NRC's "Republication of Systems of Records Notices" that is located in NRC's Agencywide Documents Access and Management System (ADAMS).

- 1. AUTHORITY: 42 U.S.C. 2137 and 2201(i).
- 2. PRINCIPAL PURPOSE(S): To ensure that applicants/licensees meet all the requirements for taking reactor operator examinations.
- 3. ROUTINE USE(S): Information may be used to determine if the individual meets the requirements of 10 CFR part 55 to take an examination or to be issued an operator's license; to provide researchers with information for reports and statistical evaluations related to selection, training, and examination of facility operators; to provide examination, testing material, and results to facility management. Information may be disclosed in accordance with any of the Routine Uses listed in the Prefatory Statement of General Routine Uses, including to an appropriate Federal, State, local or Foreign agency in the event the information indicates a violation or potential violation of law and in the course of an administrative or judicial proceeding. In addition, this information may be transferred to an appropriate Federal, State, local and Foreign agency to the extent relevant and necessary for an NRC decision about you. Information may also be disclosed, in the course of discovery under a protective order issued by a court of competent jurisdiction, and in presenting evidence, to a Congressional office to respond to their inquiry made at your request, or to NRC-paid experts, consultants, and others under contract with the NRC, on a need-to-know basis. Information may be used to determine if the individual meets the requirements of 10 CFR part 55 to take an examination or to be issued an operator's license; to provide researchers with information for reports and statistical evaluations related to selection, training, and examination of facility operators; to provide examination, testing material, and results to facility management. Information may be disclosed to an appropriate Federal, State, local or Foreign agency in the event the information indicates a violation or potential violation of law; in the course of an administrative or judicial proceeding; to an appropriate Federal. State, local and foreign agency to the extent relevant and necessary for an NRC decision about you; in the course of discovery under a protective order issued by a court of competent jurisdiction, and in presenting evidence; to a Congressional office to respond to their inquiry made at your request; to NRC-paid experts, consultants, and others under contract with the NRC, on a need-to-know basis; or to appropriate persons and entities for purposes of response and remedial efforts in the event of a suspected or confirmed breach of data from this system of records.
- **4.** WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION: Disclosing this information is voluntary. However, if the information requested is not provided, NRC will not be able to evaluate whether the applicant meets the requirements of 10 CFR part 55.
- 5. SYSTEM MANAGER(S) AND ADDRESS: Chief, Operator Licensing Branch, Division of Inspection and Regional Support, Office of Nuclear Reactor Regulation, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001.