

DOT OPERATOR QUALIFICATION

QUALIFICATION EVALUATION

Initial
Subsequent

EMPLOYEE FULL NAME (P		Last	four of SS#	
Job Title	Area	Work Location	j .	
Subtask Name In-Service Welding			Subtask #:	10-03.00
SUBTASK OBJECTIVE: Using one or more	of the below "Evaluation Me	ethods", demonstrated the know	vledge, skill and abil	tv to perform this task
following these qualification criteria.		,		.,
				Qualified
1. Safety Requirements:				
Ability to identify and resolve abnormations				
2. Access, understand and apply the follo	owing Company Standard	(s):		
Gas Standard - D-23				
3. Qualification:				
Welder performing in service welding	shall be qualified in accord	ance GSD-30.4		
4. Repair Method:	16 U 1			
Determine the best leak repair method for the transmission pipelines, including replacement, sleeves, or bands				
EVALUTION METHODS (Check all that				
Observation On-The-Job Performance Observation by Simulation Oral Test				
Observation by On-The-Job Training Written Base Test OTHER - Field Pe		Performance Audit 🔲		
Comments / Actions:				
EVALUATOR'S NAME AND CORP ID	FV	ALUATOR'S SIGNATURE		DATE

6/15/04 version OM&C/FSD - Mail completed **original** Qualification Evaluation for<u>m(s)</u> to Room B101 @ 3301 Crow Canyon Rd, San Ramon, CA. CGT - Mail completed **original** Qualification Evaluation form(s) to @ 375 N. Wiget Lane, Walnut Creek, CA. OM&C/FSD/CGT - Send copy to LGOQPC (Local Gas Operator Qualification Plan Coordinator)

GTR0009828 Material Redacted

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Initial/Subsequent Evaluator Instructions

Subtask	In-Service Welding	Subtask#:	10-03.00
Name:			

Evaluator must provide the following reference material(s):

- · Abnormal Operating Condition (AOC) Job Aid
- Gas Standard

Note:

Using reference material(s) listed above, individuals must answer all questions correctly. If individual cannot provide the correct answer(s) or demonstrate performance after two additional attempts, the Evaluator should refer to the Operator Qualification Basic Plan Manual, Section 1.3.3.3 for further instructions.

Knowledge

Criteria #	Requirement
1.	Review Annual Operator Qualification Job Aid and Abnormal Operating Conditions (AOC)
	with individual(s).
2. – 3.	There are no test questions for this subtask.

Performance

Periorila	nce
4.	Individual must perform checks as required on the Qualification Evaluation for each of these following method(s): • Repair Method
	Note: Skill must be demonstrated through simulation or actual field performance. Individual must verbalize each action step (bulleted item in Step 4).

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