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Forms

[Note: Include copies of the forms used in the type evaluation laboratory. The forms in this section are samples.]

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Personnel Training and Competency									
Name of Staff:									
Position:									
Training Provider Subject/TopicsTraining DatesHoursCompletedStaffSupervisor									
	From	То		Yes	No	Initial	Date	Initial	Date

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Calibration and Maintenance Log (Standards and Equipment)													
Standard or Equipment	Date		Date		Date		Date	Condition on Receipt	Manufacturer	Model/ Serial	Cal. Status/ Maintenance Date	Current Location	Comments: (Maintenance, Malfunction, Modification, Repair)
	Received	In- Service											

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	Software Program Verification										
Software Program/Version	File Name / File size	Manufacturer / Developer	Verification: Data Set Runs						Verification Date	Verified by (Initials)	Comments
			Pass	Fail							

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Equipment Assessment								
	Item Information							
Range	Manufacturer	Model	Test Method	Standard Deviation	Yes	Comments Attached		

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	Proficiency Test Results								
Date	Range	Accuracy Class	Coordinating Organization	Procedure Used	Operator	Results			
						Passed	Passed With Concerns	Failed	Corrective Action Follow-Up

Form No. ST03MA3-01	Rev. Date: July 1, 2003

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	Audit Log							
Audit Description	Date Conducted	Auditor	Location of Audit Report	Audit Findings / Corrective Actions				

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	Work Log							
Test No.	Date Received	Item (s) Received	Test Requested	Requested By	Date Tested	Date Completed	Date Returned	Comments

Form No. ST03AF4-01	Rev. Date: July 1, 2003	

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Complaints / Corrective Action					
Subject of Complaint / Discrepancy	Date	Response Date	Reviewed By	Actions Taken / Results	

Form No. ST03AF2-01	Rev. Date: July 1, 2003
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Environmental Conditions/Deviations Log								
Location	Date	Time	Temperature EC	Within " EC	Relative Humidity %	Within "%	Pressure mm Hg	Within " mm Hg

Form No. ST03MR1-01	Day Datas July 1 2003	
FORM NO. STUSWIRI-UI	Rev. Date: July 1, 2003	

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		Subcontrac	tors and Ou	itside Suppli	ers Verificati	on Log			
State Metrology Laboratory Performing Test	Test Item(s)	Date	Laboratory Accredited		Supplier Type of Supply		Verification		
			Yes	No			Type of Verification Performed	Appro	oved
								Yes	No

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