

Appendix A

<p style="text-align: center;">NUCLEAR WASTE MANAGEMENT PROGRAM</p> <p>Sandia National Laboratories</p>	<h2 style="margin: 0;">Auditor Qualifications</h2>	<p style="text-align: center;">Form Number: NP 18-1-1</p> <p style="text-align: center;">Page 1 of 1</p>
--	--	--

Name: _____ Employer: _____

Education (degree, discipline, institute, year) _____

Experience _____

**Audit/Surveillance
Participation (if any)** _____

See Section 2.1.3.1 for details on training requirements.

A. **Orientation** – Training which provides a working knowledge of QA requirements and NP 18-1 Audits and Surveillances.

B. **Training Program**
 Course description and date: _____
 Sponsor: _____

C. **On-the-Job-Training** - Training, guidance, and counseling during the conduct of audit(s) under the direction of Lead Auditor.

The Auditor Candidate or Technical Specialist named above is qualified as a Quality Assurance Auditor within the SNL WIPP QA Program.

_____ SNL WIPP Assessment Task Lead (Signature)	_____ Date Qualified
_____ SNL WIPP Assessment Task Lead (Print)	