Instructor Background And Information Form

Thank you for filling out this form.

Presentation Title: STEP SOFA SOLO Process and SOP Training Program

Presenter: Don Watson Title: Controls System Engineer

Employer: Jacobs Engineering Address: 1100 NE Circle Blvd., Suite #300

City: Corvallis State: OR Zip: 97330 Phone: 541-740-0171

Summary of Lesson content: This program covers training for the new solids facilities (SOFA) at the CBWTP. The training includes, odor control, polymer system, pumping, mixing, thickening, dewatering, conveyance system and solids loadout.

This training will orient and inform attendees of the operational procedures and strategies of these systems.

Professional Background: (Note a brief - 2 page maximum - resume may be submitted in lieu of the following data. Please be sure the resume includes all requested information. Qualifications should be related to your presentation.) Use the reverse side of this form if more room is needed to fully answer the following questions.

Primary Knowledge/Skills/Abilities related to presentation: See Attached.

Education (High School, Upgrades, Colleges and Degrees): See Attached.

Professional Registration/Certification: See Attached.

Related papers/instruction you have presented:

Title: _____ Date: _____ Event: _____

Title _____ Date: _____ Event: _____

Professional Organizations/Activities:

_____ Date: _____

_____ Date: _____

Course sponsor: waterdude solutions

Signature of Instructor: _____ Date: 9/16/26

DO NOT WRITE BELOW THIS LINE

Date Evaluated: _____ By: _____ Approved: Yes_____ No _____

Return Completed Form To:

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