



# Instructor Background And Information Form

Thank you for filling out this form.

Presentation Title: Aerated Stabilization Basin

Presenter: Rick Marshall Title: President

Employer: METC Group Address: 2870 NW Duchess PL

City: Corvallis State: OR Zip: 97330 Phone: 5417527696

Summary of Lesson content: Reviews operation of aerated stabilization basins including types of basins, factors affecting performance and troubleshooting

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.  
43 years in wastewater as operator/ engineer/consultant providing operator training

Primary Knowledge/Skills/Abilities related to presentation: troubleshooting and o&m documentation, present many workshops on wastewater topics

Education (High School, Upgrades, Colleges and Degrees): BS Civil Eng

Professional Registration/Certification: PE - OR, ME, Grade VII - MA

Related papers/instruction you have presented:

Title: \_\_\_\_\_ Date: \_\_\_\_\_ Event: \_\_\_\_\_

Title \_\_\_\_\_ Date: \_\_\_\_\_ Event: \_\_\_\_\_

Professional Organizations/Activities:

WEF Date: \_\_\_\_\_

METC Group Date: \_\_\_\_\_

Course sponsor: \_\_\_\_\_

Signature of Instructor: Rick Marshall Date: 7/29/2020

DO NOT WRITE BELOW THIS LINE

Date Evaluated: \_\_\_\_\_ By: \_\_\_\_\_ Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

Return Completed Form To: OESAC CEU COMMITTEE  
 P.O. Box 577  
 Canby, OR 97013-0577  
 Email: [info@oesac.org](mailto:info@oesac.org)  
 Phone: 503-698-6486