

Instructor Background And Information Form

Thank you for filling out this form.

Presentation Title: Math for	Operators and Read	ing Process &	Instrumenta	tion Documents		
Presenter:	· · · · · · · · · · · · · · · · · · ·	Т	Title: Sr. Controls Engineer / Vice President ddress: 5015 208th St SW Zip: 98036 Phone: 425-778-8280			
Employer: QCC Quality Co	ontrols Corp	Address	5015 208t	h St SW		
City: Lynnwood	State:	WA Zip:	98036	Phone:	78-8280	
Summary of Lesson conter	nt:	ts and practic	e relevant to	water and waste	water opera	ators.
Understanding process and						
Workshop will include prac	tice in reading and de	eveloping P&I	Ds. See cou	rse description a	nd schedule	e for detals.
Professional Background: (Please be sure the resume Use the reverse side of this	includes all requeste form if more room is	d information. needed to ful	Qualification ly answer the	ns should be rela e following questi	ted to your բ ions.	presentation.)
Primary Knowledge/Skills/A	Abilities related to pre	sentation:	cticing Contr	ol Systems Engir	neering - Ro	outinely design
and built/integrate control s						
Education (High School, Uր	ogrades, Colleges an	d Degrees):	.S. Mechanic	cal Engineering; l	Jniversity of	f Washington
		0 /				
Professional Registration/C	ertification: E.I.T - W	ashington Sta	ate			
						
Related papers/instruction	you have presented:					
Title:Telemetry System Mo	dernization Date	5/9/17 & 5/6	5/2/18 Event:	Washington Ass	ociation of	W&S Districts
Title Pump Station O&M Be						
Professional Organizations, AWWA Short School	/Activities:			Date:	2018-currer	nt
WAWSD Fall Conference a	Date: 2017-current					
Course sponsor:						
Signature of Instructor: Date:						
DO NOT WRITE BELOW THI	S LINE					
	D. a.			Approve	dı Voo	No
Date Evaluated:					d: Yesl	INU
Return Completed Form To:	OESAC CEU COMM P.O. Box 577 Canby, OR 97013-0	F	Email: <u>info@oe</u> Phone: 503-69			