

Facility: **Perry**Date of Examination: **Feb. 2021**

Item	Task Description	Initials		
		a	b*	c#
1. W R I T T E N	a. Verify that the outline(s) fit(s) the appropriate model, in accordance with ES-401 or ES-401N.	<i>[initials]</i>	<i>[initials]</i>	ROB
	b. Assess whether the outline was systematically and randomly prepared in accordance with Section D.1 of ES-401 or ES-401N and whether all K/A categories are appropriately sampled.	<i>[initials]</i>	<i>[initials]</i>	ROB
	c. Assess whether the outline over-emphasizes any systems, evolutions, or generic topics.	<i>[initials]</i>	<i>[initials]</i>	ROB
	d. Assess whether the justifications for deselected or rejected K/A statements are appropriate.	<i>[initials]</i>	<i>[initials]</i>	ROB
2. S I M U L A T O R	a. Using Form ES-301-5, verify that the proposed scenario sets cover the required number of normal evolutions, instrument and component failures, technical specifications, and major transients.	<i>[initials]</i>	<i>[initials]</i>	ROB
	b. Assess whether there are enough scenario sets (and spares) to test the projected number and mix of applicants in accordance with the expected crew composition and rotation schedule without compromising exam integrity, and ensure that each applicant can be tested using at least one new or significantly modified scenario, that no scenarios are duplicated from the applicants' audit test(s), and that scenarios will not be repeated on subsequent days.	<i>[initials]</i>	<i>[initials]</i>	ROB
	c. To the extent possible, assess whether the outline(s) conforms with the qualitative and quantitative criteria specified on Form ES-301-4 and described in Appendix D and in Section D.5, "Specific Instructions for the 'Simulator Operating Test,'" of ES-301 (including overlap).	<i>[initials]</i>	<i>[initials]</i>	ROB
3. W A L K T H R O U G H	a. Verify that the systems walk-through outline meets the criteria specified on Form ES-301-2: (1) The outline(s) contains the required number of control room and in-plant tasks distributed among the safety functions as specified on the form. (2) Task repetition from the last two NRC examinations is within the limits specified on the form. (3) No tasks are duplicated from the applicant's audit test(s). (4) The number of new or modified tasks meets or exceeds the minimums specified on the form. (5) The number of alternate-path, low-power, emergency, and radiologically controlled area tasks meets the criteria on the form.	<i>[initials]</i>	<i>[initials]</i>	ROB
	b. Verify that the administrative outline meets the criteria specified on Form ES-301-1: (1) the tasks are distributed among the topics as specified on the form (2) at least one task is new or significantly modified (3) no more than one task is repeated from the last two NRC licensing examinations	<i>[initials]</i>	<i>[initials]</i>	ROB
	c. Determine if there are enough different outlines to test the projected number and mix of applicants and ensure that no items are duplicated on subsequent days.	<i>[initials]</i>	<i>[initials]</i>	ROB
	d. Determine if there are enough different outlines to test the projected number and mix of applicants and ensure that no items are duplicated on subsequent days.	<i>[initials]</i>	<i>[initials]</i>	ROB
4. G E N E R I C	a. Assess whether plant-specific priorities (including probabilistic risk assessment and individual plant examination insights) are covered in the appropriate exam sections.	<i>[initials]</i>	<i>[initials]</i>	ROB
	b. Assess whether the 10 CFR 55.41/43 and 55.45 sampling is appropriate.	<i>[initials]</i>	<i>[initials]</i>	ROB
	c. Ensure that K/A importance ratings (except for plant-specific priorities) are at least 2.5.	<i>[initials]</i>	<i>[initials]</i>	ROB
	d. Check for duplication and overlap among exam sections.	<i>[initials]</i>	<i>[initials]</i>	ROB
	e. Check the entire exam for balance of coverage.	<i>[initials]</i>	<i>[initials]</i>	ROB
	f. Assess whether the exam fits the appropriate job level (RO or SRO).	<i>[initials]</i>	<i>[initials]</i>	ROB

Printed Name/Signature

a. Author Ray Torres *[Signature]*

b. Facility Reviewer (*) Steve Kapostasy *[Signature]*

c. NRC Chief Examiner (#) ZANDAL DEAN BAKER / Zandal Dean Baker *[Signature]*

d. NRC Supervisor _____

Date

11/20/2020

11/20/2020

12/11/2020

* Not applicable for NRC-prepared examination outlines.

The independent NRC reviewer initials items in column "c"; the chief examiner's concurrence is required.