# Non-NERC Approved Training Activity Submission

Name of PJM Designated Training Liaison: Date

Name of Member Company:

|  |
| --- |
| **NERC Approved CE Activity (Course) Information:** |
| Activity Title: |       |
| Activity Description: |       |
| Activity Hours:EOP: |            | Activity relates to the following NERC Standards:(Indicate # of hours) | CIP-004       COM-002       EOP-004       EOP-005       EOP-008       IRO-001       PER-005        |

|  |
| --- |
| **Task Association** |
| Please indicate the Task(s) that relates to this Learning Activity: |
| **Generation**[ ]  G01 - Forward-looking Data Submittal & Verification      [ ]  G02 - Resource Reporting & Testing      [ ]  G03 - Respond to Unit Problems & Monitor Parameters      [ ]  GCS3A - Respond to Unit Problem Notification      [ ]  GCS3B - Requirements for Bringing Unit On/Off      [ ]  G04 - PJM Operational Information      [ ]  G05 - Capacity Emergencies      [ ]  G06 - Voltage Emergencies      [ ]  G07 - Conservative Operations      [ ]  G08 - BUCC      [ ]  GCS8 - Loss of Functionality Procedures      [ ]  G09 - Restoration Condition      [ ]  GCS9 - Restoration Requirements      [ ]  G11 - Equipment Outages      [ ]  G12 - Data Exchange      [ ]  GCS12 - Data Accuracy in EMS      [ ]  G13 - Telecommunications      [ ]  G14 - Communication Exchange       | **Transmission**[ ]  T01 - Weather & Load      [ ]  T02 - BES Equipment Problems      [ ]  TCS2 - BES Equip Problem Notification      [ ]  T03 - Reactive Resources      [ ]  T05 - Monitoring Facilities      [ ]  TCS5A - Security Analysis      [ ]  TCS5B - Load Shed      [ ]  T06 - Operational Information      [ ]  T07 - Capacity Emergencies      [ ]  T08 - Voltage Emergencies      [ ]  T09 - Conservative Operations      [ ]  T10 - BUCC      [ ]  TCS10 - Loss of Functionality Procedures      [ ]  T11 - System Restoration      [ ]  T11.1 - EOP-005-3 T8.1 System Rest Plan      [ ]  T11.2 - EOP-005-3 T8.2 Rest priorities      [ ]  T11.3 - EOP-005-3 T8.3 Cranking paths      [ ]  T11.4 - EOP-005-3 T8.4 Synchronizing      [ ]  T11.5 - EOP-005-3 T8.5 Transition of DR      [ ]  TCS11 - Restoration Guide      [ ]  T12 - Equipment Outages      [ ]  TCS12A - Modeling Outages      [ ]  TCS12B - SCADA      [ ]  T13 - Data Exchange      [ ]  TCS13 - Data Accuracy in EMS      [ ]  T14 - Telecommunication      [ ]  T15 - Communication Exchange       |

|  |
| --- |
| **Participant Information** |
| **Learner’s Name** | **NERC Certification Number****(if applicable)** | **Date of Training** | **Total # of Training Hours Awarded** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

|  |
| --- |
| **Sponsorship Affidavit** |
| The submitting PJM Training Liaison, on behalf of the sponsor(s), agrees to:* Maintain accurate records of all participants’ attendance and submit via this form to the PJM office following the completion of the training activity. For activities where partial credit is allowed, the sponsor will record those parts of the learning activity that the participants completed.
* Ensure that the training activity is delivered according to the PJM Member Systematic Approach to Training, that attendance is monitored and accurately recorded, and that the evaluation is performed and the results are accurately recorded and retained.
* Maintain relevant course documentation for three years.
* Uphold the standards for high quality continuing education activities.
 |
| I agree: [ ]  | Training Liaison Name:        |