**APPENDIX B**

**TECHNICIAN CAPABILITIES**

**Provide the required information for each technician**

|  |  |
| --- | --- |
| **Technician Name:**  |  |
|  |
| **College Coursework:** Please identify the amount of college credit earned for courses in this field of expertise. |
| Institution Name/Location: |  |
| Year Graduated: |  |
| Degree(s) Awarded or Focus of Studies: |  |
| Credits Earned: |  |
|  |  |
| **Work Experience:** Please identify employment history in this field of expertise. *(current employment first)* |
| Employer Name: |  |
| Job Title: |  |
| Employment Dates: |  |
| Types of Equipment Serviced: |  |
|  |  |
| Employer Name: |  |
| Job Title: |  |
| Employment Dates: |  |
| Types of Equipment Serviced: |  |
|  |  |
| Employer Name: |  |
| Job Title: |  |
| Employment Dates: |  |
| Types of Equipment Serviced: |  |
|  |  |
| **Professional Development:** Please identify any certifications (in this field of expertise) you possess and any continuing education courses taken. |
| Certification Type: |  |
| Date Received/Valid Thru: |  |
|  |  |
| Certification Type: |  |
| Date Received/Valid Thru: |  |
|  |  |
| Name of Course: |  |
| Date of Course: |  |
| Credit Hours: |  |
| Course Description: |  |
|  |  |
| Name of Course: |  |
| Date of Course: |  |
| Credit Hours: |  |
| Course Description: |  |
|  |  |

**Attach additional pages, as needed.**