

VIRGINIA ENVIRONMENTAL LABORATORY ACCREDITATION PROGRAM
 VIRGINIA DIVISION OF CONSOLIDATED LABORATORIES
 600 North 5th Street
 Richmond, Virginia 23219
 (804)648-4480

Laboratory Management Qualifications [1 VAC 30 Chapter 46]

Staff Member: _____ Job Title: _____

Laboratory Name: _____ Date Started Current Position: _____

Position*:

Technical Manager Quality Manager

Discipline(s) – select all that apply:

Chemical Analysis Microbiology Quality Assurance

Radiochemistry Microscopy Other: _____

EDUCATION:**

Month/Year From – To	College/University & City, State	Major & Degree	Year Compl.	Sem. Cred. Hrs. Per Discipline

TECHNICAL TRAINING:**

Month/Year From – To	Technical, Trade or Service School & City, State	Subject & Certificate	Year Compl.	Sem. Cred. Hrs. Per Discipline

RELEVANT EXPERIENCE:**

Month/Year From – To	Name of Employer & City, State	Job Title & Description

*Refer to NELAC 2003 4.1.1 and 5.4.1.5(h) and (i) for position requirements.

** DCLS Assessors may request additional information or documentation of stated information.

Submit this form for EACH staff member in a technical manager or quality manager role (however named).

DCLS USE ONLY:	Assessor's Initials, Date: _____.
Applicant [meets / does not meet] the requirements for technical manager for the discipline(s) indicated by the applicant. Comments/Notes: _____	
