

FAA Capability Maturity Model (FAM) - Appraisal Team Selection Form
1/27/2003

Candidate Information

(Items 1-8 to be filled in by candidate. Item 9 is for candidate's supervisor and, if Government contractor, COTR approval. Item 10 is reserved for iPG Senior Representative's concurrence/comments.)

1. Appraisal Name: _____ Date: _____
2. Name: _____ Routing Symbol: _____
3. Title/Series/Grade: _____ E-Mail: _____
Phone: _____
4. Project: _____ Current Role: _____
Years of Experience: _____
5. Subject Matter Expertise: (e.g.: Configuration Management, Project Management, Quality Assurance and Management)

6. Process Improvement Training: (iCMM, ISO 9001-2000) Model and Version: _____

- If you have not completed iCMM Model and Generic Practice Training, when are you planning to attend? _____
7. Prior Appraisal Experience: (Appraisal name and date) _____

8. Cost Estimates for this Appraisal: Travel \$ _____ Time _____
(3-day Appraisal Training/Appraisal) (3-day Appraisal Training/Appraisal)
9. Approval: (Approved form to be submitted by candidate's supervisor to Directorate's Integrated Process Group (iPG) Senior Representative)
- Approved:** _____
(Immediate Supervisor) (COTR)

10. Selection or other recommendation/comments from iPG Senior Representative (with a copy to iPG Executive Member) to Appraisal Coordinator: _____

Selection Status and Feedback

(To be completed by Appraisal Coordinator/Appraisal Team Lead/Appraisal Sponsor and returned to Candidate)

- Selected Not Selected (check all below that apply)
- Candidate's subject matter expertise not compatible with team mix
- Too many team members from the organization being appraised
- Sponsor rejected
- Other _____

Selection Official: _____
(Appraisal Coordinator)

(Candidate information is to be retained by the appraisal Coordinator throughout the appraisal process)