

## ACHIEVEMENT PROGRAM MASTER BUILDER MOTIVE POWER STATEMENT OF QUALIFICATIONS FORM

May 2006 page 1 of 2

Member's Name:		NMRA #:		
Street:	City:		State/Prov:	
ZIP/PC:	Country:	NMR.	A Region:	
Date Submitted:	E-Mail:		Phone:	
To qualify for this certif	ïcate you must:			
defined as a locomotive of contain the following scra Steam Locomotive driving rods. Other Motive Por appropriate. All models must be capal models may be commercial	ls of railroad motive power, one or a self-propelled vehicle. To quantchbuilt items as applicable: ves: frame, boiler, cab, tender framewer: body, frame, cab, power truckel of self propulsion on track of all motors and gears. All models parts as defined in the AP Regulation of the three scale models	alify as scratchbuilt, me, body, either val- ck frame, pantograph the same gauge as th must be superdetaile ations "DEFINITIO	the motive power must  ve gear or main and side  h or trolley poles where  ne model. Power trains for all ed either with scratchbuilt  NS" Section.	
model contest or AP Mer		of motive power en	mer via an Nivika sponsored	
Attachment gives Identification of List of all the control of The materials under the control of	atement of Qualifications (SOQ) ing detailed descriptions of the n f the scratchbuilt features. ommercial components appearing used in building the models. the Merit Awards.	nodels.	the following:	



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May 2006 page 2 of 2

	Description of Model	Scratch Built	Merit Award	Verified By	Date	NMRA#		
1								
2								
3								
Member's Statement and Agreement:								
I certify that I have completed all of the requirements for this Certificate of Achievement as listed above and that I will agree to assist other members in this subject whenever possible, whether or not they are participants in the Achievement Program.								
NAN	ME:	SIGNATU	RE:Date:					
Certification of Regional Achievement Program Chair								
As the NMRA Regional Achievement Program Chair of the, I certify that I have examined this SOQ and, having compared it to the stated requirements for this certificate, I am satisfied that the stated requirements have been met.								
NAN	ME:	SIGNATURE:			Date:			
	ion Cert #:  proval by AP National Executiv	e Vice Cha	ir					
	ME:				Date	•		