



Orange Empire Section 0701



CQA Refresher Course

SPONSORED BY: Orange Empire Section 0701, ASQ

EXAM DATE: December 5, 2009

EXAM APPLICATION DEADLINE: October 16, 2009

LOCATION: Alcon Laboratories, located at 15800 Alton Parkway, Irvine, CA.

Exit 405 Freeway at Sand Canyon, go right on Alton Parkway ¼ mile to Telemetry; turn right into Alcon parking lot. Use Employee Entrance. Room assignment will be made on the first night.

TIME: 6:00 - 9:00 PM

COURSE FEE: \$400 per person + cost of books *Scholarships are available – contact Education Chair.*

SESSIONS/DATES: 9 Sessions: **Mondays** – from **October 5 to November 30, 2009.**

Will cover: Certification Overview, Auditing Fundamentals, Auditor Competencies, Audit Preparation, Audit Performance, Audit Reporting, Audit Follow-up & Closure, Audit Business Applications, Quality Tools & Techniques, plus Tips & Strategies on taking the exam.

REQUIRED TEXT: CQA Primer with Solutions Text from Quality Council of Indiana
or The ASQ Auditing Handbook 3rd Edition from ASQ Quality Press

TEXT COST: Primer \$65.00 Solutions Text \$35.00 Ph: 812-533-4215 <http://qualitycouncil.com>
Auditing Handbook Item#H1263 \$63.00 Ph: 800-248-1946 <http://qualitypress.asq.org>

OPTIONAL TEXT: Quality Audits for Improved Performance by Dennis R. Arter
How to Plan an Audit by ASQ Quality Audit Technical Committee
Optional texts can be ordered from ASQ Quality Press Ph: 800-248-1946

INSTRUCTORS: Mark Lindsey (mark.lindsey@disney.com Cell 714.273.2678)
Aaron Reddoch (aaronreddoch@yahoo.com)

ENROLLMENT: Open through **October 26, 2009**

NOTE: Class fees must be paid no later than the 3rd session, and no refunds will be made after the 3rd session. Minimum class size is 8 students.

To REGISTER (2 OPTIONS):

1. To register on-line for the class go to <http://www.acteva.com/booking.cfm?bevaaid=189501>
2. Or, fill out Registration Form below using your credit card or make check payable to "ASQ Orange Empire Section 0701" and mail both to:
Attn: Mark Lindsey, 1035 E. Tularosa Ave, Orange CA 92866-2839

Note: To register for the Exam, go to <http://www.asq.org>

CQA

Exam Refresher Course Mail-In Registration Form

(Make additional copies of Registration Form as needed for mailing.)

STUDENT NAME: _____

WORK PHONE: _____ **HOME PHONE:** _____ **EMAIL:** _____

ADDRESS: _____

If paying by credit Card: Type of Card: Master Card Visa Charge Amount: _____

Credit Card Number: _____ Auth Code (Last 3 digits from card back): _____

Expiration Date: _____ Cardholder Name (Printed): _____

Cardholder Signature: _____ Telephone: _____

Cardholder Address (if different): _____

Cardholder Phone Number (if different): _____