GOES-R PS-PVR Chair Dispostion Form

Product Validation Level

Beta   Provisional   Full Validation

Date

_____

Algorithm

ABI L1b/CMI   EXIS L1b   GLM L2

MAG L1b   SEISS L1b   SUVI L1b

1. Review Board Comments

Approval Status

Approved   Conditionally Approved

2. If conditionally approved, list actions required to become approved.

Conditionally
Approved
_____
PS-PVR Chair   Signature   Date

Approved
_____
PS-PVR Chair   Signature   Date

3. Other Notes