

6. PERSONAL INFORMATION

ADDRESS

ADDRESS (CONT'D) APT #

CITY/STATE / PROVINCE

COUNTRY POSTAL CODE

HOME TELEPHONE NUMBER WORK TELEPHONE NUMBER

MOBILE TELEPHONE NUMBER

E-MAIL ADDRESS - *REQUIRED*

DATE OF BIRTH DD/MM/ YYYY

Exam Information and Documents Delivery: All the information related to your certification process will be directed and addressed to your Agent. **Please contact your AWS International Agent in order to know information about your exam, policies, fees, results, and certification documents.**

7. Current Job

<p>Type of Business (check only ONE)</p> <p>A <input type="checkbox"/> Contract construction</p> <p>B <input type="checkbox"/> Chemicals & allied products</p> <p>C <input type="checkbox"/> Petroleum & coal industries</p> <p>D <input type="checkbox"/> Primary metal industries</p> <p>E <input type="checkbox"/> Fabricated metal products</p> <p>F <input type="checkbox"/> Machinery except elect. (incl. gas welding)</p> <p>G <input type="checkbox"/> Electrical equip., supplies, electrodes</p> <p>H <input type="checkbox"/> Transportation equip. - air, aerospace</p> <p>I <input type="checkbox"/> Transportation equip. - automotive</p> <p>J <input type="checkbox"/> Transportation equip. - boats, ships</p> <p>K <input type="checkbox"/> Transportation equip. - railroad</p> <p>L <input type="checkbox"/> Utilities</p> <p>M <input type="checkbox"/> Welding distributors & retail trade</p> <p>N <input type="checkbox"/> Misc. repair services (incl. welding shops)</p> <p>O <input type="checkbox"/> Educational Services (univ., libraries, schools)</p> <p>P <input type="checkbox"/> Engineering & architectural services (incl. assns.)</p> <p>Q <input type="checkbox"/> Misc. business services (incl. commercial labs)</p> <p>R <input type="checkbox"/> Government (federal, state, local)</p> <p>S <input type="checkbox"/> Other</p>	<p>Job Classification (check only ONE)</p> <p>01 <input type="checkbox"/> President, owner, partner, officer</p> <p>02 <input type="checkbox"/> Manager, director, superintendent (or assistant)</p> <p>03 <input type="checkbox"/> Sales</p> <p>04 <input type="checkbox"/> Purchasing</p> <p>05 <input type="checkbox"/> Engineer — welding</p> <p>06 <input type="checkbox"/> Engineer — other</p> <p>07 <input type="checkbox"/> Inspector, tester</p> <p>08 <input type="checkbox"/> Supervisor, foreman</p> <p>09 <input type="checkbox"/> Welder, welding or cutting operator</p> <p>10 <input type="checkbox"/> Architect, designer</p> <p>11 <input type="checkbox"/> Consultant</p> <p>12 <input type="checkbox"/> Metallurgist</p> <p>13 <input type="checkbox"/> Research & development</p> <p>14 <input type="checkbox"/> Technician</p> <p>15 <input type="checkbox"/> Educator</p> <p>16 <input type="checkbox"/> Student</p> <p>17 <input type="checkbox"/> Librarian</p> <p>18 <input type="checkbox"/> Customer service</p> <p>19 <input type="checkbox"/> Other</p> <p>20 <input type="checkbox"/> Engineer - design</p> <p>21 <input type="checkbox"/> Engineer - manufacturing</p> <p>22 <input type="checkbox"/> Quality Control</p>	<p>Technical Interests (check ALL that apply)</p> <p><input type="checkbox"/> Ferrous metals</p> <p><input type="checkbox"/> Aluminum</p> <p><input type="checkbox"/> Non-ferrous except aluminum</p> <p><input type="checkbox"/> Advanced materials/intermetallics</p> <p><input type="checkbox"/> Ceramics</p> <p><input type="checkbox"/> High energy Processes</p> <p><input type="checkbox"/> Arc Welding</p> <p><input type="checkbox"/> Brazing & Soldering</p> <p><input type="checkbox"/> Resistance Welding</p> <p><input type="checkbox"/> Thermal Spray</p> <p><input type="checkbox"/> Cutting</p> <p><input type="checkbox"/> NDT</p> <p><input type="checkbox"/> Safety & Health</p> <p><input type="checkbox"/> Pipe & Tubing</p> <p><input type="checkbox"/> Pressure Vessels & Tanks</p> <p><input type="checkbox"/> Structures</p> <p><input type="checkbox"/> Roll Forming</p> <p><input type="checkbox"/> Sheet metal</p> <p><input type="checkbox"/> Stamping & punching</p> <p><input type="checkbox"/> Bending & shearing</p> <p><input type="checkbox"/> Aerospace</p> <p><input type="checkbox"/> Automotive</p> <p><input type="checkbox"/> Machinery</p> <p><input type="checkbox"/> Marine</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> Automation</p> <p><input type="checkbox"/> Robotics</p> <p><input type="checkbox"/> Computerization of Welding</p>
<p>The documents AWS QC1 and AWS B5.1 must be read: http://www.aws.org/certification/docs/QC1-2007.pdf http://www.aws.org/certification/docs/b5.1-2003-errata.pdf</p> <p>The International Certification Schedule is available on our webpage, just click on "View Schedule Information" http://www.aws.org/certification/inter_contact.html</p>		

8. Education Level: check the appropriate box below

 I understand that all work experience and education documented on this application will be verified by AWS
(initials) prior to exam confirmation.

<input type="checkbox"/> Did not complete the 8th grade <ul style="list-style-type: none"> • CWI applicants must document twelve (12) years of work experience in the Section below. • CAWI applicants must document six (6) years of work experience in the Qualifying Work Experience Section below.
<input type="checkbox"/> Did not graduate high school, but completed the 8th grade <ul style="list-style-type: none"> • CWI applicants must document nine (9) years of work experience in the Qualifying Work Experience Section below. • CAWI applicants must document four (4) years of work experience in the Qualifying Work Experience Section below.
<input type="checkbox"/> High school graduate (must attach proof of graduation) <ul style="list-style-type: none"> • SCWI applicants must document fifteen (15) years of work experience, and must have been certified as a CWI during 6 years or more. • CWI applicants must document five (5) years of work experience in the Qualifying Work Experience Section below. • CAWI applicants must document two (2) years of work experience in the Qualifying Work Experience Section below.

9. Additional Education

<input type="checkbox"/> VoTech Credits MUST attach transcripts of welding related courses or diploma	Check No. of years attended 0 1 2 3 4 5 6	Maximum one (1) year work substitution credit <i>only</i> if courses <i>completed</i> and <i>within</i> a curriculum related to welding. (Must attach proof of graduation or transcripts)
<input type="checkbox"/> University Credits MUST attach transcripts of engineering-level courses or diploma	Check No. of years attended 0 1 2 3 4 5 6	Maximum two (2) years work substitution credit <i>only</i> if the degree is in engineering technology, engineering, or physical science (Must attach proof of graduation or transcripts)

10. Qualifying Work Experience: résumé/CV's are not accepted

PLEASE DUPLICATE THIS SECTION FOR EACH ADDITIONAL EMPLOYER IN ORDER TO MEET THE QUALIFYING WORK EXPERIENCE REQUIREMENTS

Company Name	Type of Business	Company Phone Number	
Company Street Address		City, State, Country, Postal Code	
Supervisor's Name	Title of Immediate Supervisor		
Supervisor's Email Address		Department	
Applicant's Job Title	Employed From:	To:	
	(Mo.) (Yr.)	(Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*			

Company Name	Type of Business	Company Phone Number	
Company Street Address		City, State, Country, Postal Code	
Supervisor's Name	Title of Immediate Supervisor		
Supervisor's Email Address		Department	
Applicant's Job Title	Employed From:	To:	
	(Mo.) (Yr.)	(Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*			

Name _____

AWS Member # _____

Company Name		Type of Business	Company Phone Number	
Company Street Address		City, State, Country, Postal Code		
Supervisor's Name		Title of Immediate Supervisor		
Supervisor's Email Address		Department		
Applicant's Job Title		Employed From:	To:	
		(Mo.) (Yr.)	(Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*				

Company Name		Type of Business	Company Phone Number	
Company Street Address		City, State, Country, Postal Code		
Supervisor's Name		Title of Immediate Supervisor		
Supervisor's Email Address		Department		
Applicant's Job Title		Employed From:	To:	
		(Mo.) (Yr.)	(Mo.) (Yr.)	
Job Responsibilities- Detailed Description Required*				

11. Employment Verification (THIS SECTION MUST BE COMPLETED BY A SUPERVISOR OR PERSONNEL MANAGER FROM THE MOST RECENT EMPLOYER)

ATTACH A LETTER FROM YOUR MOST RECENT EMPLOYER ON COMPANY LETTERHEAD CERTIFYING YOUR TIME EMPLOYED, FUNCTIONS, AND JOB TITLE HELD.
IF CURRENTLY SELF-EMPLOYED OR A CONTRACT APPLICANT YOU MUST SUBSTITUTE THIS SECTION WITH A LETTER OF REFERENCE ON COMPANY LETTERHEAD FROM TWO (2) SEPARATE CLIENTS ATTESTING TO THE NATURE OF WORK ASSIGNMENTS DURING THE PERIOD OF PERFORMANCE, TYPE OF WORK DONE AND LENGTH OF TIME AS A CLIENT.

Company Name: _____ Company Phone: _____

Company Address: _____

City, State: _____ Postal Code: _____ Country: _____

I _____, verify that _____ maintained employment at
Supervisor/Personnel Manager's Name Employee's Name (print)

_____ from _____ to _____
Company Name Date dd/ mm/yyyy Date dd/ mm/yyyy or Present

Signature: _____
Supervisor/Personnel Manager's Signature

Date: _____
dd/mm/yyyy

