***APPLICATION FOR WELDER TEST***

1. NAME OF THE WELDER :
2. FATHER’S NAME :
3. DATE OF BIRTH :
4. ADDRESS :
5. IDENTIFICATION MARK :
6. CATEGORY OF TEST

(initial/Requalification)

(If Requalification , previous certificate

To be enclosed) :

1. NAME & ADRESS OF FIRMS

WHERE TRAINED :

1. TESTED ON(Pipe, Tube, Plate) :
2. KIND OF TEST POSITION

(Groove, Gillet, Branch) :

1. CLASS OF TEST PIECES

(carbon steel, Alloy Steel) :

1. QUALITY OF ELECTRODE OR

 FILLER ROD :

1. DIMENSION OF MATERIAL :

I hereby declare that all the information provided are true and best of my knowledge and belief .

Date :

Place:

 *Signature of Welder*