



The Indian Institute of Welding-ANB
Authorised Nominated Body of the International Institute of Welding in India
IIW-India House, Plot No: 38-Geetanjali Park
200, Kalikapur Main Road, P.O Mukundapur,
Kolkata - 700 099, Phone:+91 33 4006 1837
E Mail:anb@iiwindia.com , Website:<http://www.iiwindia.com>



APPLICATION FORM

for an Organisation wishing to become an
Approved Training Body - ATB
in accordance with National ANB-India Rules

Please complete the form in **BLOCK CAPITALS** or **TYPESCRIPT**.

Please enclose **ONE SET** of the documentation requested with the completed form.

A list of relevant current IIW-ANB Documents is available on request and the documentation should be referred to before submitting the application.

1. Name of applicant Training Body seeking Approved

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Address.....

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Name of Contact Person.....

Telephone number.....Fax number....

Email address (if available).....

2. Legal Structure of the proposed ATB

What type of organization is the prospective ATB (e.g., limited company, independent body etc)?

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Please provide copies of documents, which define the ATB legal status and its functions, organization and management.

3. Scope of Approval sought

Please list below the courses leading to the award of an IIW Diploma for which approval is sought (e.g., International Welding Engineer/ International Welder etc):

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4. Documentation

Please provide the Quality Manual for the ATB or any other documentation that includes the complete description of ATB activities regarding general organization and responsibilities, facilities and their maintenance, teaching staff and their continuous training, etc.

5. Declaration

I declare that the information on this form and any other information given in support of this application is correct, to the best of my belief. I have read the Rules for ATBs issued by the IIW-India ANB and undertake to ensure that the applicant ATB (Approved Training Body) I represent will abide by these requirements if granted approval by the ANB (Authorised Nominated Body of IIW).

Signed for & on Behalf of ATB.....

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Responsible Authorised Person of prospective ATB.....

Place..... Date

6. Return the form and the attachments to:

The CEO/Director ANB
The Indian Institute of Welding-ANB
IIW India House,
Plot No. 38, Geetanjali Park,
200, Kalikapur Main Road, P.O. Mukundapur,
Kolkata – 700 099, INDIA.