APPLICATION FORM TO APPEAR IN NWTCs EXAMINATION OF IIW-INDIA

1. NAME: ____________________________________________

2. DATE OF BIRTH: ___________________________________

3. PRESENT ADDRESS: __________________________________
   Pin Code: __________________________________________
   Email: ___________________________ Cell No.:______________

4. PERMANENT ADDRESS: ________________________________
   Pin Code: _____ Email: ___________________ Cell No.:________

5. FATHER’S NAME: ___________________________________

6. Educational Qualification: ______________________________

7. Details of any prior training/experience in welding: _______________________

8. Details of any prior certification obtained in welding: _______________________

9. REGISTRATION NO. OF ATC: ___________________________ DATE:________

10. Aadhar Card No. ______________________________________

11. I wish to be examined on the following process & level (Course Name and Code)
    Name of the course: _______________________________ Code: __________

12. Name of the ATC: ____________________________________
    (Not Applicable for direct candidate)

13. Examination Centre for External Candidates (if any):_____________________

14. Does the Applicant require any special help for any kind of physical disability within a reasonable limit, Yes [ ] No [ ]

   If yes, please specify with supporting documents: ____________________________

Stamp size Photo of candidate to be pasted and attested by ATC

Prepared By: Mr. A.K. Bose  Reviewed By: AD-CS  Approved By: MR
15. Declaration: I, ____________________________, declare & confirm the following:

(i) that the above particulars are true and I shall produce all of my certificates in original for verification by the examiner.

(ii) I possess appropriate health, eyesight, physical and mental capability for safe operation of welding equipment with full performance of duties as may be necessary during the Certification process.

(iii) My eyesight is satisfactory (normal vision or corrected by spectacles) to perform welding jobs.

(iv) My colour vision is sufficient that I can distinguish and differentiate between the colours used in the NDT methods.

(v) I am aware that in the Certification examination to be conducted under ATC, the examination and test as per NWTCs will include questions and tests from the total curriculum of the concerned courses and I agree to comply with the certification requirements and to supply any information needed for the assessment.

(vi) I also agree to abide by the requirements and restrictions for the use of the NWTCS certificate/logo as prescribed in the NWTC Guidelines.

(vii) I shall not divulge any confidential information regarding question papers and practical tests and keep required information confidential.

(viii) I shall not indulge in any form of malpractices or fraudulent acts during the assessment.

16. I am enclosing the necessary fees for certification Rupees ________________

17. Two extra copies of my passport size photographs signed by me on the reverse is attached.

Date: ________________  (Signature in full)

Note: The candidate is informed that as per the NWTCs Rules, he/she has a right to complain to the NWTCs Management against any unfair treatment accorded to him/her during the application and/or the assessment process in respect of written, oral or practical examination. Further, in case he/she feels that the assessment results do not fairly reflect his/her performance in the assessment, he/she has a right to appeal to the NWTCs Management. For this purpose, the candidate should submit his/her complaint/appeal in writing to the Management Representative, NWTCs.
The candidate has been examined and has satisfied the theoretical and practical requirements for the course ______________________

and Code _________ as per internal assessment of the ATC.

Date: ______________________________

(Signature of the Principal with stamp)

FOR OFFICE USE ONLY

Name of the Candidate:____________________________________________________________

Review of Application: All the above particulars are verified & found accepted Yes No

All the necessary documents are in order Yes No

Special help required, if any : Yes No

Verification of supporting documents: Accepted & Approved: Yes No

Special help required by candidates: may be provided within reasonable limits: Yes No

The application is accepted and the applicant is approved as a candidate for NWTCS Examination:

Signature
For NWTCS- IIW-INDIA

Candidate’s Registration No. from IIW-India:________________________________________

Assessment Batch No. _____________________________________________________________

Date of Registration:_____________________________ (Signature with Office seal)