



APPLICATION FORM FOR ADMISSION TO (IWI-C, IWI-S, IWI-B)
International Welding Inspection Personnel: Comprehensive, Standard & Basic
BY TRANSITIONROUTE

Part – A

1. FULL NAME: _____
(in CAPITAL WITH CORRECT SPELLING)

2. Photo Identity Card Ref _____ Citizen _____

3. Name of Father/ Mother _____ DOB _____ Place _____

4. Mailing Address: _____

Contact Phone No: (Mobile No.): _____ E Mail Address _____

5. Application under Transition Route for course (please \surd any one): IWIP – C / IWIP – S / IWIP - B

6. Details of crossed D.D. Enclosed: No.: _____ Date: _____ on Bank
_____ for Rs. _____.

7. Are you a member of the Indian Institute of Welding? Yes | No

8. If yes, Membership Number _____.

9. I understand that the decision of the IIW-ANB Assessment Committee regarding my eligibility following applicable IIW-IAB Rules & Guidelines is final and binding on me.

“I understand that by applying through the Transition Route and after acquiring the diploma I will be responsible for its correct use and shall take measures to prevent misuse such as modifications of its content. In the case of misuse the ANB can initiate legal activities against the diploma holder”.

Place: _____

Date: _____

Signature of Candidate

FOR OFFICE USE ONLY

REGISTRATION NUMBER ALLOTTED:

Part – B

10. Academic Qualifications (from Class X onwards).

S. No.	Examination Passed	Board / Institute / University	Specialisation	Year of Passing	% Marks / Grade Point obtained
1.					
2.					
3.					
4.					
5.					

N.B.: 1. Enclose attested copies of Certificates and Mark Sheets.
2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

11. Details of other Professional Examinations Passed.

S. No.	Examination Passed	Organising Institution	Specialisation	Year of Passing	% Marks / Grade (if any)
1.					
2.					
3.					

N.B.: 1. Enclose attested copies of Certificates and Mark Sheets.
2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

11. Details of NDT Qualifications&/or Welding Inspection of TWI/AWS

S. No.	Name of NDT Stream	Year of Passing	Certificate No.	Valid Upto	Certification Authority
1.					
2.					
3.					
4.					
5.					

N. B.: 1. In case of higher level of certifications, there is no need to mention the lower level.
2. Name of NDT stream should indicate the level of certificate.

12.Details of additional Training in welding undergone

S. No.	Name of Training	Name of Organisation	Duration		Details of Certificate(s) obtained
			From	To	
1.					
2.					
3.					

- N.B.:** 1. Enclose attested copies of Certificates and Mark Sheets.
2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

13. Details of Employment

S. No.	Name of Employer	Status / Position	Duration		Nature of Duties	Reasons of Leaving
			From	To		
1.						
2.						
3.						

- N.B.:** 1. Enclose attested copies of Certificates and Mark Sheets.
2. In case Certificate / Mark Sheet is in a language other than English, enclose an English Translation Certified by the Head of the Deptt. / Head of Institution / Gazetted Officer.

14. Enclose a curriculum vitae (C.V.) / resume containing professional information, including

- i. Evidence of education / training courses passed / attended, after Diploma / Degree / Technician Certificate / ITI Training.
- ii. Evidence of job function(s) after Diploma / Degree / Training course, including position(s) held, job(s) executed, and the level of responsibility (Welding Engineer / Welding Technologist / Welding Specialist / Welding Practitioner).
- iii. Any other relevant professional achievement(s):

P.S.: Enclose attested copies of documents in support of the above.

15. List of Enclosures (number the enclosures).

- | | |
|----|----|
| 1) | 3) |
| 2) | 4) |

16. I understand that the refresher course will be followed by the IIW-India ANB examination process covering, all the Modules for Welding Technology & Welding Inspection following IIW Guideline 041 apart from verification of knowledge and competence gathered during the candidates' specific area of experience as a necessary requirement for award of IIW Diploma at the appropriate level.
17. I understand the risks of providing wrong information or falsified documents in relation to satisfying the access conditions, Transition Criteria and Visual test compliance for the appropriate diploma. If such cases occur and are proved beyond reasonable doubt, the applicant understands that the ANB shall ensure that the diploma is withdrawn apart from taking any legal action as appropriate.
18. I understand the risks of providing wrong information or falsified documents in relation to satisfying the Access Conditions & Transition Criteria for the appropriate diploma. If such cases occur and are proved beyond reasonable doubt, the applicant understands that the ANB shall ensure that the diploma is withdrawn apart from taking any legal action as appropriate.
19. Declaration: I have read the Prospectus/Brochure, and I agree to abide by the Rules and Regulations concerning assessment and evaluation for IWIP – B / S / C (please √ any one) under Transition Route.

Vision Test Certificate by a registered Eye Specialist

Name of Candidate:

Date of Birth:.....Reference of Identity Document of Candidate.....

Organisation:.....

Distant Vision: Corrected / Natural:

Left Eye: Right Eye:

Near Vision: Corrected / Natural:

Left Eye: Right Eye:

Colour Vision:

Remarks of the Eye Specialist whether the Candidate meets the requirements of the standard (Extract reproduced below) **Yes / No**

Signature of Eye Specialist

Full Name in CAPITAL

Regd. No.....

Address:

Place:

Date:

I re-affirm that all the information and supporting documents produced are true and correct and I accept full responsibility for the same as per my declaration under 17 given by me.

Place: _____

Signature of Candidate

Date: _____

Extracts from ISO 9712: 2012 Clause 7.4 Vision Requirement

The candidate shall provide documented evidence of satisfactory vision, in accordance with the following requirements:

- (a) Near vision shall permit reading a minimum of Jaeger number 2 or equivalent type and size letters at not less than 80cm on a standard Jaeger test chart for near vision, in at least one eye, corrected or uncorrected.
- (b) Colour vision shall be sufficient that the candidate can distinguish and differentiate between the colours used in the NDT method concerned and colour vision to be tested as per ISHIHARAS Charts.
- (c) Distant vision shall equal smaller fraction 6/20 or better in at least one eye, either uncorrected or corrected.
- (d) The Certification body may consider replacing the requirements in a) with an appropriate alternative. Subsequent to Certification, the tests for near vision acuity shall be carried out annually and verified by employer