



THE INDIAN INSTITUTE OF WELDING

(A Member Society of the International Institute of Welding)

Registered & Head Office

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CIN: U27310WB1966GAP026807 | GSTIN: 19AAATT5926E1ZC

AM – IIW EXAMINATION

APPLICATION FORM FOR ENROLMENT
FOR THE SUMMER / WINTER SESSION

June / December – 20

Preserve the Original & used Photocopy for every session of AMIIW Examination

Enrolment Fee and Examination Fee amounting to Rs. _____ (Rupees _____)
_____) is enclosed by Crossed Bank Draft in favour of "The Indian Institute of Welding", payable in Kolkata.

Number: _____ Date: _____

Amount: _____ On (Bank): _____

Membership No.: _____ Roll No.: _____

Candidate's Name _____

Age _____ Yrs Date of Birth _____

Address (Mailing) _____

Pin-Code: _____

Email: _____ Phone No.: _____

A. Subjects to appear

Sl. No.	Subject Code	Subject Name	Sl. No.	Subject Code	Subject Name
1.	AME – _____		6.	AME – _____	
2.	AME – _____		7.	AME – _____	
3.	AME – _____		8.	AME – _____	
4.	AME – _____		9.	AME – _____	
5.	AME – _____		10.	AME – _____	

B. Other Information

1. Attached to I.I.W. – _____ Branch.

2. Choice of Examination Centre – 1st Choice: _____, 2nd Choice: _____

Date: _____

Signature of the Candidate