TRA05/EX07 Doc 1

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PLEASE SEND THE COMPLETED FORM OR A PHOTOCOPY WITH YOUR PAYMENT AND THE NECESSARY ENCLOSURES TO:

TWI Training & Examination Services

TES Canada Inc

#36,4620 Manilla Road SE,Calgary, AB, Canada, T2G 4B7

Tel: +1 (0) 403 245 5548

info@tescan.ca

Personal Information	(PLEASE USE CAPITAL LETTERS THROUGHOUT)
TWI Candidate ID Number: (If known)	
Event title Event date	
	(5)
Candidate's Family Name (as per ID	/ Passport)
Candidate's Middle Name (as per ID	/ Passport)
Candidate's Given Name (as per ID /	/ Passport)
D	D M M Y Y Y
Date of Birth	/ /
Permanent private address	
Permanent private address	
Postcode:	Car Reg. No
Private Tel.:	
Emergency Tel.:	
E-mail:	
Correspondence address (if differe	ent from above)
Correspondence address (ii diniere	in nom above,
Invoice address (if different from be	low)
Sponsoring Company and Addres	s
Contact Name:	Postcode:
Contact Name: Tel.:	Fax:
E-mail:	I u
Do you have a disability or any special neelevant to this course or examination?	YESII NOII
	of any adjustments you may require).

	☐ Self-sponso	red	☐ Company sponsored			
Methods of Paymer	nt (The E-transfe	er metho	od is preferd)			
Bookings received without payment / order Number will be treated as provisional, which does not guarantee a place.						
1) E-transfer to accounting@tescan.ca It's an auto deposit account, no need security question/ password. 2) Direct deposit/Wire transfer. TES Canada Bank account info below. 3) By Cheque. It can be mailed to: TES Canada Inc. 1520, 240-70 Shawville Blvd SE, Calgary, AB, Canada, T2Y 2Z3						
Bank Name: RBC (Roy Account Name: TES C. Account No:1070812 Transit No:02299 Institution No:003 RBC Address:Royal Ba (Postal code T2Y 2Z7)	ANADA INC.		Blvd SE, Calgary, AB, Canada			
SWIFT Code: ROYCC/ Sort code: //CC000302 IBAN code: 003107081	299					
Sponsor's signature:						
	(Handwritten sig	nature requ	ired)			
Venue						
☐ Calgary	☐ Toront		☐ Quebec			
☐ Edmonton	☐ Fort E	rie	☐ Vancouver			
□ Brazil	□ USA		☐ New Brunswick			
Where did you hear	about TWI Ltd?	?				
☐ TWI Corporate	Website		LinkedIn			
☐ CSWIP Websit	е		Facebook			
☐ Email marketin	g		NDT News / Insight			
☐ Bulletin / Conne	ect		Exhibitions / Events			
☐ Google search			Word of Mouth			
Other (please s	specify)					
regarding TWI		and care	TWI to send you information er progression opportunities. else.			
	ation process, car	ndidate d	contact details will be passed ompletion of the certification			
Please tick if you a	re					
☐ a member of T	ne Welding & Joir	ning Soci	iety			
an employee o	f an Industrial Me	mber of	TWI			
Internal Use Only						
	Booking R	ef:				

TWI enrolment form

Section 1:	Examination A	pplied For	(to be completed in full by all a	pplicants)

Examination Type		☐ Initial	☐ su	ipplementary	ı	renewal	□ bridging □ retest of a proexamination		etest of a previously failed examination	
Examination Body		☐ CSWIP	☐ P(CN		AWS	☐ BGAS	□ BGAS □		ASNT
PCN or BGAS	PCN or BGAS Approval Number:									
Current CSWIP qualifications held:										
Section 2: CSWIP Welding Inspection examination (to be completed in full by all candidates for Welding Inspection Examinations)										
Please by ticking the box indicate the examination of your choice										
☐ VWI (3.0))	☐ WI (3.1)		☐ SWI (3.2.	1)	☐ SWI	(3.2.2)	☐ AW	/S→CSWII	Р
☐ Endorse	ment	☐ Instructor		☐ Superviso	or	□ QC C	Coordinator	☐ AS	ME IX	
	ng Insp	ection Scheme doc								rience. Compliance with these the CSWIP website.
Please tick relev	ant box (this must be signed an	d verified by	an employer/third p	oarty)					
VWI (3.0)		igh there is no speci eering experience ar				nmended that	candidates pos	ssess a mi	nimum of s	six months' welding related
WI	Welding Inspector for a minimum of 3 years with experience related to the duties and responsibilities listed in Clause 1.2.2 under qualified supervision, independently verified.									
(3.1)										
	☐ Welding Instructor or Welding Foreman/Supervisor for a minimum of 1 year.									
SWI Certified Welding Inspector for a minimum of 2 years with job responsibilities in the areas listed in 1.2.1, 1.2.2 and 1.2.3.										
(3.2.1 & 3.2.2)	(3.2.1 & 3.2.2) 5 years' authenticated experience related to the duties and responsibilities listed in Clause 1.2.3, independently verified.									
Welding	Welding A current valid CSWIP 3.2 Senior Welding Inspector certification plus three years documented experience related to the duties and responsibilities or an international equivalent.								ce related to the duties and	
QC coordinator										
		Hold current valid	Senior We	lding Inspector or	internation	onal equivalen	t.			
		Certified Welding I	nspector w	vith five years rele	evant ver	ified work expe	erience or inter	national ed	quivalent	
ASME IX		A HNC in Welding	Fabricatio	n						
Working in quality control function related to welding activities with five years of verified working experience (this could relate to a CSWIP WI (3.1) holder										
Please give a de	tailed sta	atement of how you me	et the requir	rements (this must b	e signed a	and verified by a	n employer/third	party)		
Section 3: Underwater Inspection (to be completed in full by all candidates for CSWIP Underwater Inspection Examinations)							tion Examinations)			
Please by ticking	the box	indicate the examination	on of your cl	hoice						
□ 3.1U		□ 3.2U		□ 3.3U		□ 3.4U		□ A-S	SCAN	□ Concrete
						_			-	

Pre-certification experience

CSWIP Underwater Inspection Scheme document stipulates the minimum requirements on the industrial pre-certification experience. Compliance with these requirements is an essential part of the eligibility criteria. Please refer to the latest version of the scheme document published on the CSWIP website.

Evidence of experience shall be completed using form EX07 - please contact TWI Customer Services for the relevant form.

TWI enrolment form

Section 4: NDT examination (to be completed in full by all candidates for CSWIP NDT Examinations)														
Please tick relevant box in each section – Method, Level, Industrial sector and (where appropriate) UT category														
Method														
□ PT		□ MT			VT		ET		□ ACF	М				
□ RT		☐ Rad Interp	pret		CR/DR		CRI / DRI		□ BRS	3		□ RPS		
□ UT		□ PAUT			TOFD		AUT		□ UTC	CM		□ P.	□ PACM	
☐ Appreciation	1	□ Basic			Phasor DM									
Level														
□ Level 1		☐ Level 2			Level 3									
Industrial sector & ca	ntegory													
Industry Se	ctor	☐ General	□ W	Velds	□ Castings		Wrought		Forgings		Tubes &	Pipes		Aero
UT Catego	ries	□ 3.1	□ 3	.2	□ 3.7		3.8		3.9		Critical s	izing		
the Examination C	an esse entre. E	xperience satisfy	ing the re	quireme	However, if such e ents detailed in CS' should be sent to C	WIP or	PCN documer	nts may	be gained	ollowi	ng examir	ation. Or	nce ev	idence of
Section 5: Please by ticking the Level 1		-		oice	leted in full by all ca	andidate	es for CSWIP Endorsement		nspection Ex	kamina	ations)			
Pre-certification experience														
					inimum requiremer ase refer to the late									
Please tick relevant l	oox (this	must be signed and	verified by	an emp	loyer/third party)									
		I hold current a	pproved N	IDT Lev	vel 2 (ACCP, CSW	IP, PCN	or ASNT) in	two me	thods, one o	of whic	ch must be	Ultrason	iic	
Plant inspection		I hold CSWIP V	Velding In	spector	r or higher									
Level 1		I hold HNC in N	/lechanica	l Engin	eering or equivaler	t								
					assessed and authenticated by Line M			perien	ce in this fiel	d (Ma	ture Entry	Route), a	a verifi	ed CV
Plant Inspection		I hold a valid Le	evel 1 Plar	nt Inspe	ector approval									
Level 2														
Please give a detailed statement of how you meet the requirements (this must be signed and verified by an employer/third party)														
Section 6: Other examinations (to be completed in full by all candidates for any other examinations)														
Please tick and specify exam title as required														
☐ Plastic weldi		,	Offsho	ore visu	ial Inspector		BGAS							
Examination title required:														
Pre-certification experience														

CSWIP and BGAS Scheme documents stipulates the minimum requirements on the industrial pre-certification experience. Compliance with these requirements is an essential part of the eligibility criteria. Please refer to the latest version of scheme document published on the CSWIP website.

Please contact TWI Customer Services for advice on relevant forms and documentation required.

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Section 7: Candidate's declaration (to be completed in full by all applicants)

I understand that TWI Ltd and its associated trading companies (and companies, organisations, or agents processing data on its behalf) will hold and use personal data supplied by me for administration purposes as per GDPR requirements.

I agree to read the Health & Safety and Security information provided by TWI and to abide by the guidance given.

I understand that occasionally images of training and examinations are taken by TWI for publicity and other purposes and that permission for my inclusion in such material is implied unless I make it known to Customer Services at registration that I do not wish to feature.

I confirm that I have read and comply with the pre examination entry requirements as laid down in the latest version of CSWIP Requirement Documents (available on CSWIP website) and understand that any fraudulent claim may result in the retraction of any certificate issued. I have read and understood the documentation issued by the scheme management that is relevant to the examination for which I am applying and declare that I satisfy those criteria covering vision, training and experience.

I accept responsibility for any examination fees in the event of non-payment by the sponsor. I agree to abide by the requirements for certification as relevant to the examination for which I am applying. In particular I agree to comply, if applicable, with the CSWIP rules on use and misuse of certificates and on professional conduct (see www.cswip.com).

I understand that any appeal against an exam result must be received within six months of the exam date.

I agree to provide any additional documents and information required by examination body to support my enrolment.

I understand that any false statement may result in the examination being invalidated.

In the event of cancellation by you, the event fee and the accommodation fee (if applicable) will be returned less a cancellation charge of 20%. If less than 14 days' notice is given by you, TWI reserves the right to retain the whole fee. TWI reserves the right to cancel the event in case of insufficient registration or illness of lecturers. TWI will ensure maximum possible notice

is given to the attendees and reserves the right to substitute lecturers and modify the course details as required.					
By signing this Enrolment form I confirm complete acceptance of the TWI Ltd Terms and Conditions of Training, copy available on request.					
Candidate's Signature:					
(Handwritten signature required)					

Section 8: Verification (to be completed in full by all applicant's verifier)

Verification is an essential part of the exam eligibility process, and the verification contact details provided by the candidate will only be used to complete the exam eligibility process. The verifier will not be contacted by TWI for any marketing or promotional purposes, and their details will not be shared to any party outside TWI or CSWIP certification body.

	•	
Verifier details		
Name (in capitals):		
Company & position:		
Professional relation to the candidate:		
Telephone no.:		
Email Address:		
Date:		Authenticated Company Stamp
Verifier's declaration:		

To the best of my belief, the candidate's statement given above is correct at the time of signing

Verifier's Signature (employer's or equivalent)

(Handwritten signature required)